.

## BEFORE THE ARBITRATION COMMITTEE ESTABLISHED UNDER SECTION 1(e) OF THE MERGER PROTECTION AGREEMENT OF NOVEMBER 16,1964

MICHAEL J. KNAPIK, et al.,

Case No. 69-722

Claimants,

v.

PENN CENTRAL,

Carrier.

Case No. 69-675

ROBERT WATJEN, et al.,

Claimants,

PENN CENTRAL,

Carrier.

DAVID C. BUNDY, et al., Case No. 69-947

Claimants,

PENN CENTRAL,

Carrier.

G.V. SOPHNER, et al.,

Case No. 74-914

Claimants,

PENN CENTRAL,

Carrier. AFFIDAVIT OF MICHAEL R. WEINMAN

## MICHAEL R. WEINMAN, being first duly sworn, says:

- 1. Michael R. Weinman is a railroad management consultant and is President of PTSI Transportation, a corporation organized under and by virtue of the laws of the Commonwealth of Pennsylvania. PTSI Transportation provides consultation in rail operations, equipment, operations, marketing, and customer/on board services.
- 2. It is my professional opinion that the decline in railroad passenger service at the Cleveland Union Terminal, occurred in the natural course of the New York Central Railroad's

business, and was not as a result of the merger between the New York Central Railroad ("NYC") and the Pennsylvania Railroad ("PRR"). The following are factors which negatively impacted the intercity passenger traffic through Cleveland in the 1950, 1960, and early 1970 eras:

The rise of the Empire Service-this restructuring of the NYC passenger service in a. New York State (and the restructuring and discontinuances which were precursor thereto in 1967) eliminated journey opportunities, discontinuing some through services where these had existed. The Empire Service began in November 1967, just 3 months prior to the merger between NYC and PRR. While successful in stemming the loss of both ridership and revenue in New York State, the changes had a slightly negative impact on "lines west", the routes from Buffalo to Cleveland, Cincinnati, St. Louis and Chicago.

b.

Discontinuance of Mail Service-up until late 1960 and early 1970, the primary means of transport for U.S. Mail was on passenger trains. Being that the CUT was primarily a passenger station, it handled numerous passenger trains which carried U.S. Mail. This provided numerous jobs for NYC employees employed at the CUT. In the 1960 decade, the U.S. Post Office instituted a policy of transferring mail from passenger service to freight trains, highway trucks, and air carriers. Automated sorting, the use of "zip" codes, and service and policy issues resulted in elimination of railway post office cars, and a substantial reduction in bulk mail carried by passenger train. Mail which had been handled at and through CUT was either lost to rail, or transferred in some cases to other facilities in Cleveland more highly automated, or adapted to non-passenger needs. Since Mail was no longer being transported on passenger trains, and the CUT was a passenger station, Penn Central was forced to close down the CUT Mail Hall on September 1, 1972 resulting in the need to reduce forces to deal with the discontinuance by the U.S. Post Office.

- c. Railway Express Agency (REA)-the REA, which was owned collectively by American railroads, which included the NYC, suffered a decline in business which resulted in cessation of all operations by 1975. During the declining years, some of its traffic was shifted to highway and air modes, accelerating the decline in revenue to the railroads. Much of the REA diversion from passenger trains occurred between 1966 and 1968.
- under the Eisenhower administration in 1958, and accelerated as the 1960 era progressed. This program, and certain state programs which resulted in such limited access highways as the New York State Thruway (which opened between 1954 and 1959) and the Ohio Turnpike (which opened in 1955), constituted a national, if de facto, public policy shift to both passenger and freight transportation to the highway mode. Freight and passenger service was increasingly diverted to the more convenient and efficient highway systems. These highways, with no grade crossings of other roads or railways, and with no traffic lights, greatly decreased travel time for trucks, buses and autos. Obviously, the shift to automobiles in the early 1940's greatly accelerated the already declining revenue of railway corporations, but the interstate highway furthered this decline by decreasing the costs and travel times brought on by new roads upon which the automobiles could use for travel. This affected not only Cleveland, but the entire U.S. as well and lead to an overall decline in railroad passenger transportation.
- e. Suburbanization-the wholesale relocation of metropolitan residential population from the inner city and surrounding areas to dispersed suburbs resulted in the diminution of much activity in central business districts. The reallocation of people into far flung suburbs substantially decreased the efficacy of the passenger service while necessitating the need for automobile ownership. Pre-suburbanization, city centers facilitated access to passenger trains

through proximity to activity in and around downtown stations. The public transportation network was made possible by dense development within a few miles of downtown stations. Dispersal of this concentration hindered convenient access to trains because much activity was remote from the station, and because local transport in the suburban environment favored the automobile. The less people used trains to travel into a city, the more they used cars to make up for the discontinued travel options. This was realized in the northeast, with suburban stations such as Route 128 (Boston), Metropark (suburban New Jersey), and New Carrollton (suburban Washington) springing up in the 1960-1970 eras, but by 1962, the outer stations serving Cleveland had essentially dried up.

- f. Riots following the death of Martin Luther King, Jr.-these urban uprisings and others across the nation in the 1960 era resulted in the perception of unsafe conditions in cities, where downtown passenger stations remained. The consequent reluctance to use inner city facilities accelerated the decline in passenger business.
- g. Decline of Local Public Transportation-CUT was constructed in a major commercial district, and served as its hub, both in terms of office and retail facilities, and as the focal point for urban rails and bus services in Cleveland. As such services declined, the ability to reach the terminal declined as well. While airports, which had always been in remote areas of and around cities, could construct parking on available land, this was not possible or inexpensive in locales such as CUT. These same issues affected cities at the other end of journeys which would start or end at CUT, again diminishing ridership.
- h. Reduction in Connecting Passenger Trains-as connecting railroads discontinued passenger trains, Cleveland passengers had fewer and fewer travel options. The proportion of "overhead" or connecting traffic, at cities such as Buffalo, Chicago, and St. Louis, was

substantial. As the weak roads exited the passenger business in most states were eliminated as potential rail destinations from Cleveland. With decreased destination options, the CUT became a less desirable hub for intercity passenger travel.

- i. Reduction in trains using the CUT (excluding Mail, Express, and trains not stopping at the CUT)-in 1961, there were 35 trains using the CUT, comprised of the New York Central (23 trains), Erie-Lackawanna (6 trains), Nickel Plate (4 trains), and the Baltimore & Ohio (2 trains). By 1971, due to the sharp decline in passenger service, there were but 11 trains using the CUT. This greater than 200% attrition rate for train usage left the New York Central with a large employee and asset overhead cost that was crippling operations at the CUT. Train movements at the CUT declined by over 50% between 1961 and 1967. While the number of trains using the CUT declined, so did their frequency. In 1961, 47 trains passed through the CUT on a daily basis, and by 1967, only 16 trains moved through the CUT daily. This decline in trains and daily train movement impacted the average number of employees needed at the CUT. In 1961, the CUT had just over 550 employees. By 1971, there were roughly 60 employees providing services. The diminution of trains using the CUT during this period resulted in less employees needed to deal with the few trains that remained.
- j. Inauguration of jet aircraft-when the first Boeing 707 entered commercial service in 1958, a "gift" from military government, journey times were reduced, and the tedium of air travel turned to the romance of air travel. Air carriers experienced higher aircraft and labor productivity, and the reliability of all-weather travel eliminated a major rail advantage. Many people found the airplane to be a more convenient and less time-consuming mode of transportation than the passenger train, and the decline in railroad passenger service reflected this trend.

- k. Construction of suburban airports-airports serving the jet age required new and bigger facilities, with lots of parking and "jet age" design. This was accomplished in city after city at the public expense, all the while the rail carriers had to maintain aging terminal infrastructure, and pay lavish tax rates on this property to boot. In Cleveland, the rapid transit system was extended to serve Hopkins Airport in the late 1960's era, a good indication that the air age had transcended the railway age as to passenger travel.
- l. Decline in heavy industry-though less evident in Cleveland than some cities, the decline in manufacturing in the eastern U.S. established the "rust belt", decreasing jobs and economic activity disproportionately. This had an effect on the travel served by the CUT.
- m. Economic recessions-a series of recessions in 1957, 1958, and 1961 accelerated the losses suffered by the operators of passenger trains using the CUT.

n. Loss of population-in addition to suburbanization, the gradual movement of population and economic activity to the sun belt saw 9 cities in the CUT service area (key destinations served from the CUT) lose 450,000 residents from 1960 to 1970. Cleveland itself lost 125,000 residents, or 18% of its population, in this period.

JEMNIFER DECKER
Notary Public, State of Texas
My Commission Expires
September 30, 2011

5 Texas

Michael R. Weinman, President

PTSI Transportation

## IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF OHIO EASTERN DIVISION

MICHAEL J. KNOPIK	, et al.,	.,}	Civil Action No. C69-722
· .	Plaintiffs	)	JUDGE LAMBROS
<b>v</b> .		)	AFFIDAVIT OF GEORGE C. ELLERT
PENN CENTRAL TRANSPORTATION COMPANY, et al.,		)	
COMPANI, et al.,	Defendants	)	•

GEORGE C. ELLERT, being first duly sworn, says:

1. George C. Ellert is Assistant Superintendent-Labor Relations of the Penn Central Transportation Company, a corporation organized under and by virtue of the laws of the Commonwealth of Pennsylvania and in reorganization pursuant to the order of the United States District Court for the Eastern District of Pennsylvania, No. 70-347, June 21, 1970.

Also, Mr. Ellert is the Assistant Superintendent-Labor Relations of the Cleveland Union Terminals Company, a Class I Railroad organized under and existing by virtue of the laws of the State of Ohio.

2. The plaintiffs herein listed in Exhibit "A" hereof were and have been employees of the Cleveland Union Terminals Company and The New York Central Railroad Company and performed compensated service for The New York Central Railroad Company between January 1, 1964 and February 1, 1968. The earnings of the plaintiffs in the within action for compensated service during 1964, 1965, 1966 and 1967 are set forth in Exhibit "A" hereof. The said compensated service was rendered and performed in the City of Cleveland in the area known as the Mail Hall, the Lakefront and 26th Street and the New York Central trackage leased from the Big Four (Cleveland, Cincinnati, Chicago & St. Louis Railway Co.) between Front Street and the Old Union Depot territory in the City of Cleveland.

EXHIBIT\_I

- 3. Each of the plaintiffs was a Cleveland Union Terminals yardman and as such, pursuant to an agreement by and between The New York Central Railroad Company, Cleveland Union Terminals Company and the respective general grievance committees of the Brotherhood of Railroad Trainmen, NYC Lines West, General Grievance Committee and the Cleveland Union Terminals Lodge No. 927. Plaintiffs were authorized and permitted to perform work for the New York Central pursuant to the said agreement, effective April 1, 1952 (Exhibit "B" hereof).
- 4. On November 16, 1964, in anticipation of the merger The Pennsylvania Railroad Company and The New York Central Railroad Company executed a Merger Protection Agreement with the Brother-hood of Railroad Trainmen and the General Chairmen of the several Grievance Committees of the Brotherhood of Railroad Trainmen having jurisdiction over the representation of trainmen, including freight and yard service employees of both the Pennsylvania Railroad and the New York Central Railroad. The said agreement is effective January 1, 1964 (Exhibit "C", hereof) and provides in part as follows:
  - "(a) \* \* the Washington Job Protection Agreement of 1936 \* \* \* shall be applied for the protection of all employes of Pennsylvania and Central as of the effective date of this Agreement or subsequent thereto up to and including the date the merger is consummated who may be adversely affected with respect to their compensation, rules, working conditions, fringe benefits or rights and privileges pertaining thereto incident to approval and effectuation of said merger; provided, however, that in addition to benefits set forth in the said Washington Job Protection Agreement, it is further agreed as follows:
  - "(b) On the date the said merger of Central into Pennsylvania is consummated the merged company will take into its employment all employes of Pennsylvania and Central as of the effective date of this Agreement or subsequent thereto up to and including the date the merger is consummated who are

willing to accept such employment, and none of the present employes of either of the said Carriers shall be deprived of employment or placed in a worse position with respect to compensation, rules, working conditions, fringe benefits or rights and privileges pertaining thereto at any time during such employment.

"For the purposes of this Agreement the term 'present employes' is defined to mean all employes of Pennsylvania or Central who render any compensated service between the effective date of this Agreement and the date the merger is consummated (both dates inclusive) provided, however, \* \* \*"

The agreement then proceeds to define the terms and the obligations relating to contracts, schedules and agreements executed prior to and subsequent to the execution of the said Agreement for Protection of Employees in Event of Merger of Pennsylvania and New York Central Railroads. The Agreement specifically provides further that any disputes between the organizations and the carriers relating to the said Agreement and implementing agreements shall be referred to arbitration.

5. Subsequent to the execution of the said Agreement above referred to as the Merger Protection Agreement (Exhibit "C"), an Agreement was executed by and between The New York Central Rail-road Company, Western District, The Cleveland Union Terminals Company and the yard service employees of both carriers represented by the Brotherhood of Railroad Trainmen, specifically the General Grievance Committee, New York Central Railroad, Western District, and the General Chairman of the Railroad Trainmen, Cleveland Union Terminals Company Local Lodge No. 927. The said Agreemen was executed February 16, 1965 (Exhibit "D", hereof, referred to as Exhibit A of the Affidavit of J. A. Lyons, hereto-fore filed in this Court).

The said Agreement consolidated the separate seniority rosters for yard service employees of The New York Central Rail-road Company Cleveland Terminal District (freight yard) and the

employees of Cleveland Union Terminals Company be placed in the New York Central Railroad Cleveland Terminal District seniority roster identified as "NYC and Big Four Joint Yard Brakeman Seniority Roster" following the junior employee currently on the NYC and Big Four Joint Roster (Exhibit "D-1) in the same relative order as they now appear on the Cleveland Union Terminals Company Yardmen's Seniority Roster with a common New York Central Freight Yard seniority date of September 10, 1964. The Agreement provided further that no names will be added to the Cleveland Union Terminals Company Yardmen's Seniority Roster.

The said Agreement further provided:

- (a) Assignments in the present Cleveland Union Terminals Company territory not bid in by Cleveland Union Terminals yardmen effective February 16, 1965 will be opened for bid to all New York Central freight yard yardmen with the seniority date prior to January 2, 1964.
- (b) Assignments including extra lists in New York Central freight yard territory not bid in by yard service employees with New York Central freight yard seniority prior to January 2, 1964 will be opened to bid by Cleveland Union Terminals Company yardmen.
- (c) All furloughed employees on present separate seniority rosters will be recalled to service before new men are employed.
- (d) Cleveland Union Terminals Company yardmen recalled from furlough for assignments, including the extra list, in the New York Central Cleveland Freight Yard territory must report for service within fifteen (15) days of the date notified by U.S. mail at their last known address or forfeit all seniority in both districts.

- (c) New employees hired after February 16, 1965 would have only one seniority date and will be added to the New York Central and Big Four Joint Yard Brakeman Seniority Roster following the junior man.
- (f) All yard service employees subject to this Agreement will be governed by the rules and agreements of the territory,

  New York Central or Cleveland Union Terminals, to which assigned,
  that is, all employees working New York Central Cleveland Terminal
  District (freight yard) assignments will be subject to the rules
  applicable in that territory and all employees working Cleveland
  Union Terminals assignments will be subject to the rules applicable
  in that territory.
- (g) Revised seniority rosters would conform to the terms of this Agreement as of the effective date hereof and will be appended to the Agreement.
- (h) The agreement was in effect as of February 16, 1965 and continues in effect unless changed in the manner prescribed by the Railway Labor Act.
- 6. Exhibit "E", hereof, is a portion of the NYC and Big Four Joint Yard Brakemen Seniority Roster of February 15, 1965 containing the seniority date, September 10, 1964, and the birth date of each of the employees therein as required by the said Agreement of February 16, 1965, Exhibit "D".
- 7. On December 21, 1966 an Agreement was made by and between the Pennsylvania Railroad and the New York Central Railroad and their employees represented by the Brotherhood of Railroad Trainmen, among others, relating to the coordination and consolidation in the event of merger of the separate facilities of the Pennsylvania and New York Central Railroad Companies. A copy of the said Agreement is appended hereto as Exhibit "F" hereof.

Protective Agreement and Appendix E of the Merger Protective

Agreement. Section VII provided for the rearrangement of seniority

districts upon the date the merger of the Pennsylvania and New

York Central Railroads is consummated or as soon thereafter as is

practicable. The said rearrangement would be made on an equitable

basis pursuant to the terms of an implementing agreement to be

executed prospectively.

Section VIII provided for implementing agreements for the consolidation of present terminals and terminal facilities including switching limits and rearrangement thereof. One of the locations specifically set forth was Cleveland, Ohio. The work at Cleveland, Ohio was to be allocated on an equitable prior right basis. This was determined by the carriers furnishing the General Chairmen with the number of cars dispatched and the engine hours operated for the period of one year commencing December 1, 1964 through and including November 30, 1965.

The matters relating to disputes as provided in the Merger Protection Agreement of 1964 was amended by the deletion of the second paragraph of Section 1(e) and the substitution of a new paragraph in lieu thereof which provided for arbitration of such disputes as arise under the said agreement.

Paragraph X. thereof provided that prospective and supplementary implementing agreements would be executed by and between the railroads and the Brotherhood of Railroad Trainmen, as contemplated by Section 4 of the Washington Agreement of 1936,

Appendix A of the Merger Protection Agreement (Exhibit "C") and such circumstances as may arise in the allocation and rearrangement of forces, seniority districts, terminal points and points of automatic release, switching limits and any other impediments to an integrated operation.

Paragraph XI provided that this Agreement shall supersede

the provisions of any agreement with which it conflicts.

- 8. On March 14, 1967 an implementing agreement for Cleveland, Ohio was executed by and between the Pennsylvania Railroad, the New York Central Railroad and their employees represented by the Brotherhood of Railroad Trainmen (Exhibit "G", hereof). The said agreement provided for the transfer and use of employees relative to the unification, coordination and consolidation in the event of merger of the separate facilities of the carriers at Cleveland. This agreement required, among other things, the protection of the equities of the New York Central men and the Pennsylvania employees working in and about Cleveland, Ohio, all as expected prospectively by the Merger Protection Agreement of 1964, as modified by the Agreements of December 21, 1966 (Exhibit "F", hereof).
- 9. The merger of The New York Central Railroad Company into
  The Pennsylvania Railroad Company and the evolution of the Penn
  Central Transportation Company was accomplished pursuant to the
  authority of the Interstate Commerce Commission, February 1, 1968.
- 10. By virtue of the consolidation of the roster of the Cleveland Uion Terminals yardmen into the New York Central and Big Four Joint Yard Brakemen's Seniority Roster, pursuant to the agreement of February 16, 1965 (Exhibit "D", hereof), the General Grievance Committee of the Brotherhood of Railroad Trainmen for the New York Central Western District and the Cleveland Union Terminals and the Danville Subdivision of the New York Central Southern District served notice pursuant to Section 6 of the Railway Labor Act on behalf of the affected employees of the Cleveland Union Terminals which they represented to bring the Cleveland Union Terminals men, as to their Cleveland Union Terminals employment, within the purview of the Merger Protection Agreement of 1964. The negotiations relating thereto progressed without resolution.

Allu On-April 28; 1969 the Penn Central Transportation Company and the Cleveland Union Terminals Company, pursuant to Section 6 of the Railway Labor Act, served a notice on the United Transportion Union (T) and their respective components representing the employees of the Penn Central and the yard service employees of the Cleveland Union Terminals to coordinate the present separate yard operations of the Cleveland Union Terminals Company with the Cleveland yard operations of Penn Central under the terms of the Washington Agreement of 1936. These negotiations were progressed and it was determined by the parties that the total work available in the merged Penn Central - Cleveland Union Terminals Company Cleveland, Ohio yard territory that the equities in the work are as follows: 65.1%, New York Central; 32.4%, Pennsylvania; and 2.5%, Cleveland Union Terminals yardmen. negotiations progressed and produced an agreement of July 11, 1969, a copy of which is appended hereto and marked Exhibit "H", (being Exhibit F of the Affidavit of J. A. Lyons and Exhibit 7 of the deposition of Beedlow). The agreement provides that:

- (a) yard operations of the Cleveland Union Terminals will be coordinated with and merged into the Penn Central Cleveland yard operations effective August 1, 1969;
- (b) Cleveland Union Terminals Company yard service employees having the seniority date prior to February 16, 1965 were given preferential bidding rights for all assignments allocated to Cleveland Union Terminals upon the agreed ratio of 65.1% 32.4% 2.5%. They would have secondary rights to assignments allocated to New York Central men based on their September 10, 1964 seniority in the former New York Central freight yard territory as established by the agreement of February 16, 1965 (Exhibit "D", hereof) and would likewise stand for service in the Penn Central seniority District Ohio No. 4 on

the basis of their September 10, 1964 seniority date in the said district;

- (c) the assignments allocated to the former Cleveland
  Union Terminals and the application referred to the pre-determined
  ratio will be those assignments in the passenger station (C.U.T.),
  Mail Hall and Express Shed:
- (d) all prior agreements between the Cleveland Union

  Terminals and its yard service employees represented by the former

  Brotherhood of Railroad Trainmen were abrogated and all agreements

  presently and hereafter in effect for Penn Central employees in

  former New York Central Cleveland yard territory will govern sub
  ject to the terms and conditions of the agreement implementing

  the merger of New York Central and Pennsylvania Railroad Cleveland

  yard territories effected March 18, 1968.

Among other provisions the Agreement provided:

- In consideration of the factual situation present in this case and without prejudice to the position of any of the parties in any other case of a like or similar nature it is understood and agreed that Cleveland Union Terminals Company yard service employees affected by this merger of the Cleveland Terminal will, effective on the date this agreement is consummated, become subject to all the terms and conditions of the Merger Protective Agreement between the former New York Central, the former Pennsylvania and the former Brotherhood of Railroad It is further understood that the Trainmen. Cleveland Union Terminals Company and former New York Central Railroad earnings during the test period established by Appendix E of the Merger Protective Agreement will be combined for the purpose of computing the earnings guarantees for Cleveland Union Terminal employees who are entitled to such guarantees under the provisions of this agreement subject to the qualifying conditions of the November 16, 1964 Merger Protective Agreement and appendices thereto.'
- 12. On February 21, 1968 each of the plaintiffs herein was sent a notice: M. Knopik, C. Tomczak, W. Grady, G. Norris, S. Tannenbaum, M. McLaughlin, F. Uher, K. Day, A. Augustus, H. Doran, W. Potosky, G. Gentile, R. Beedlow, J. Acree, E. Benko, C. Steimle and J. Gastony, together with H. A. Anderson, Local Chairman, and

J. A. Lyons, General Chairman of the Brotherhood of Railroad
Trainmen. Said notice was issued by A. B. Cravens, Transportation Superintendent, Cleveland Union Terminals Company. Said notice, sent by Certified Mail, read as follows:

"Effective at 12:01 A.M., February 25, 1968, the extra list of yard men at Cleveland Union Terminals Company is being reduced and you are furloughed effective at that time.

"You have rights in the Cleveland Freight Yard territory by virtue of agreement effective February 16, 1965 and may stand for employment in the Freight Yard territory. You should immediately contact General Yardmaster D. J. Weisbarth."

- 13. From and after February 25, 1968 F. C. Uher continued to work the Cleveland Union Terminals Company as a yard brakeman, was given a leave of absence for personal reasons and subsequent thereto he died.
- 14. On February 29, 1968 General Chairman J. A. Lyons requested that the seniority of the men "remain on a more or less status quo basis until we have an opportunity to meet and discuss the matter. This was addressed to C. L. Stalder, Assistant General Manager, Employee Relations, New York Central, with copies to H. A. Anderson, Local Chairman, Local Lodge No. 927, and R. Beedlow, Secretary, Local Lodge No. 927 (Exhibit "I", hereof).
- 15. The New York Central and Big Four Joint Yard Brakemen Seniority Roster of July 1, 1968 carried the entire Cleveland Union Terminals Yardmen roster commencing with No. 387 and continuing through No. 440.0f the parties to the within action, F. C. Uher died, C. Tomzcak returned to work, W. Grady died October 1969, M. McLaughlin was physically qualified, J. Acree returned to work a few days and marked off, E. Benko returned to employment, M. Knopik retired as of December 1, 1968, J. Gastony returned to employment, G. Gentile returned to work, C. Steimle returned to work and was subsequently disabled, H. Doran returned to work.

16. On May 2, 1969 General Yardmaster D. J. Weisbarth sent Exhibit "J" hereof (Beedlow deposition Exhibit 1, to the Local Chairman and General Chairman together with the following individuals: W. Potosky, A. Augustus, S. Tannenbaum, G. Gentile, M. McLaughlin, E. Benko, C. Tomzcak, W. Grady, C. Steimle, J. Acree, H. Doran and R. Beedlow. The said letter was a recall notice pursuant to the agreement by and between the Brotherhood of Railroad Trainmen and the Penn Central Transportation Company. 17. On May 7, 1969 each of the abovementioned persons sent a letter dated May 7, 1969 to D. J. Weisbarth, General Yardmaster, acknowledging receipt of the recall notice of May 2, 1969 with reference to the furlough of February 25, 1968. (Exhibit "J-1") 18. On May 16, 1969 C. L. Stalder, Superintendent, Labor Relations, sent by Certified Mail a letter to ; each of the following at his last known address to the Railroad: S. Tannenbaum, C. Tomczak, G. Gentile, W. Grady, M. McLaughlin, J. Acree, E. Benko, W. Potosky, H. Doran, A. Augustus, R. Beedlow and C. Steimle. (Exhibit "J-2" hereof.)

19. On May 19, 1969 W. Potosky, A. Augustus, S. Tannenbaum, G. Gentile, M. McLaughlin, E. Benko, W. Grady, C. Tomzcak, C. Steimle, J. Acree, H. Doran, R. Beedlow acknowledged receipt of Mr. Stalder's letter of May 16, 1969. (Exhibit "J-3")

20. On May 26, 1969 General Yard Master D. J. Weisbarth instructed each of the following to report for duty and take the necessary return to service physical examination upon the proper forms and return the forms to the office of the General Yard Master at Collinwood or Rockport by June 13, 1969: C. Steimle, R. Beedlow, A. Augustus, H. Doran, W. Potosky, E. Benko, J. Acree, M. McLaughlin, G. Gentile, W. Grady, C. Tomzcak and S. Tannenbaum.

He advised that all persons okayed by the doctor must mark up for work by June 15, 1969.

- 21. On June 23, 1969 by written letter sent to C. Steimle,
- R. Beedlow, A. Augustus, H. Doran, S. Tannenbaum, W. Potosky,
- G. Gentile, W. Grady and C. Tomczak, they were informed:

"Since you have not reported for service in Collinwood or Rockport Yards as directed by my letters of May 2 and May 26, 1969, you have forfeited all seniority pursuant to Article 6 of the February 16, 1965 Agreement."

- 22. On June 25, 1969 it was disclosed that C. Steimle was physically disqualified -- broken foot.
- 23. On July 14, 1969 C. Steimle and M. McLaughlin were informed that by virtue of their physical disqualifications and being unable to perform service, neither of them had forfeited his seniority.
- 24. On August 22, 1969 General Chairman Lyons was informed by the Superintendent, Labor Relations, C. L. Stalder that C. Steimle and M. McLaughlin, having been found physically incapacitated for return to service, have remained on the roster. Gentile, C. Tomczak and W. Potosky having qualified, marked up and and were notified at their homes to report for work at the Freight Yard. That on August 21, 1969 it was agreed by and between the General Chairman Lyons and Mr. C. L. Stalder for the carrier that the carrier was willing to restore the seniority of Messrs. Gentile, Tomczak, Potosky, Beedlow and Doran provided they return to active service on or before September 15, 1969 and having been out of service more than thirty days all five men must take and pass the return to work physical examination prior to reporting for work. If they should have any difficulty in obtaining an appointment for the return to work examination they should contact General Yardmaster Weisbarth or Assistant Superintendent Taylor. Mr. Stalder proceeded to state on behalf of the carrier

that Messrs. Tannenbaum, Grady and Augustus not having responded to the May 16, 1969 recall, the carrier considers they have forfeited their employment and seniority rights. However, Mr. Stalder stated that if these men are desirous of returning to service he is willing to further discuss the matter of their reinstatement on condition that they also will report for return to service examinations, and make themselves available for active service not later than September 15, 1969 (Exhibit "K", hereof).

25. On December 12, 1969 it was agreed by and between General Chairman Lyons, UTU (T) and C. L. Stalder, Superintendent, Labor Relations, Penn Central, that G. Gentile and C. Steimle had returned to service and exercised their seniority at the Freight Yard and that Messrs. Tannenbaum, Tomczak, Doran, Augustus and Beedlow would be given letters to return to work to report to the General Yardmaster at the Cleveland Union Terminals for return to active service on the Cleveland Union Terminals, that the disability of M. McLaughlin was corroborated and continued. It was agreed that by granting this extension to these five men, if they are subsequently furloughed from the Cleveland Union Terminals, they will be compelled to exercise their prior right and/or Penn Central seniority. It was further agreed that those not responding would have forfeited all seniority and employment rights as of the letter notice of August 22, 1969.

26. On December 13, 1969 the following men were called back and placed on the Cleveland Union Terminals extra board as of December 15, 1969, S. Tannenbaum, C. Tomzcak, H. Doran, A. Augustus, R. Beedlow, J. Acree, W. Potosky, M. McLaughlin.

At the time of the said recall for Cleveland Union

Terminals extra board, G. Gentile, J. Gastony, C. Steimle and E.

Benko were employed at the Penn Central Transportation Company at other locations.

- 27. Exhibit "L", hereof, is a copy of the December 15, 1969

  letter sent to Messrs. Beedlow, Augustus, Tannenbaum, Doran,

  Tomczak and Acree. Subsequently Messrs. Doran and Tomczak returned to service after return to work physical examinations.
- 28. On December 15, 1969, Messsrs. Acree and Potosky were informed by General Yardmaster Cala that, having refused to accept the call of December 13 for return to work at the Cleveland Union Terminals, their prior right territory, their names are being removed from the Cleveland Union Terminals roster and also the Freight Yard Roster thereby forfeiting all seniority and employment rights with the carrier, Cleveland Union Terminals Company and Penn Central Transportation Company.
- 29. On July 1, 1961 agreement was made by and between the

  New York Central Railroad Company, Western District, and the

  employees thereof represented by the Brotherhood of Railroad

  Trainmen relating to compulsory retirement. This agreement pro
  vides that from and after January 1, 1966 all employees represented

  by the General Grievance Committee of the Brotherhood of Railroad

  Trainmen, Western District, shall retire at age 65. Upon con
  solidation of the rosters described in the Agreement of February 16,

  1965 (Exhibit "D", hereof) all yard service employees of the

  Cleveland Union Terminals Company became subject to the said

  retirement agreement, (Exhibit "M", hereof).
- 30. On March 26, 1962 agreement (Exhibit "M-1" hereof) was made by and between the Cleveland Union Terminals Company and the employees thereof represented by the Brotherhood of Railroad Trainmen. This agreement provided that from and after August 1, 1962 each of such employees shall retire as of the last day of the month in which they attain the age of 65 years and upon such retirement their seniority rights shall be terminated and their names removed from the seniority rosters.

31. The present status of each of the plaintiffs in the within action is as follows:

Retired as of December 1, 1968 M. Knopik Presently employed, freight yard C. Tomczak Deceased W. Grady Presently employed G. Norris Never returned, removed from S. Tannenbaum seniority roster Physically disabled, retained on M. McLaughlin seniority roster F. Uher Returned to employment, leave of absence, deceased Presently employed K. Day Never returned, name removed from A. Augustus seniority roster Returned to employment, died 1973 H. Doran Never returned, name removed from W. Potosky seniority roster December 15,1969 Presently employed G. Gentile Never returned, name removed from R. Beedlow seniority roster Returned to employment, subsequent J. Acree to February 25, 1968, marked off, did not accept recall, name removed from roster, December 15, 1969 Presently employed Presently employed E. Benko C. Steimle J. Gastony Presently employed

- 32. Exhibit "N" hereof is the agreement presently in effect governing yardmen and switchtenders in the Freight Yard territory including Cleveland Union Terminals yardmen working in former New York Central territory.
- 33. Exhibit "O" hereof is the Operating Agreement governing the work in the Cleveland Union Terminals territory as distinguished from the former New York Central territory and the former Pennsylvania Railroad territory.
- 34. No other employee of the New York Central Railroad Company as a trainman nor any other employee of the Penn Central Transportation Company as a trainman has any greater job protection than that available to the plaintiffs. The same criteria have been used for determining employment rights, compensation rights, fringe benefits, seniority rights, prior working conditions pro-

tection, equities and coordination allowances. The protected rates for each employee, including the plaintiffs, is determined by the same criteria and same standard applied to his earnings during the base period.

- 35. Any dispute by and between the several plaintiffs as individuals and the defendant Trustees of the Penn Central Transportation Company relating to seniority, the call for employment, the application and interpretation of the labor agreements presently existing by and between the Brotherhood of Railroad Trainmen and its successor the United Transportation Union, and the Carrier, and wage disputes arising out of the interpretation thereof, are minor disputes for which the agreements provide negotiation, in particular instances, arbitration and the procedures of the Railway Labor Act and the exclusive jurisdiction of the National Railroad Adjustment Board pursuant thereto.
- 36. The work assignments available to each of the plaintiffs from and after February 25, 1968 provide that each of the plaintiffs would have had continuous employment subject only to physical disability and retirement at age 65. If all of the men having Cleveland Union Terminals rights and seniority of September 10, 1964 had worked regularly subsequent to February 25, 1968 the junior man on the seniority roster and others below him would have and did work filling the available job assignments to this date.

Appendix C - a separate roster of all employees on furlough or leave of absence.

Upon the said rosters, Appendices B and C not one of the plaintiffs of the within action was listed.

38. Not one of the plaintiffs in the within action has invoked the arbitration provisions of the several job protection and implementation agreements, has not invoked the grievance procedures available to them as members of the Brotherhood of Railroad Trainmen and represented on the property of the New York Central Railroad Company, and its successor, Penn Central Transportation Company, and also represented on the Cleveland Union Terminals Company, to the consolidation of the rosters in the Agreement of February 16, 1965 (Exhibit "D") nor have any of the plaintiffs invoked the administrative remedies available under the Railway Labor Act through the procedures preliminary to invoking the jurisdiction of the National Railroad Adjustment Board.

All issues relating to the application of the Agreement of February 16, 1965 consolidating the rosters of the Cleveland Union Terminals yard men into New York Central and Big Four Joint Brakemen's roster, the issues relating to the implementation of the Merger Protection Agreements, including consolidation of the Cleveland Terminal Switching District, and issues arising out of the furlough notice of February 21, 1968 and the several recall notices issued subsequent thereto, including the last recall notice of December 15, 1969, and the loss of income, compensation or benefits resulting therefrom, are "minor" disputes as defined by the Railway Labor Act and within the exclusive jurisdiction of the National Railroad Adjustment Board and the grievance procedure by and between the carrier as an employer and the Brotherhood as the employee representative.

Further affiant sayeth not.

George C. ELLERT

Sworn to before me and subscribed in my presence this 10 day of April, 1974.

Notary Public

1 IN THE UNITED STATES DISTRICT COURT 2 NORTHERN DISTRICT OF OHIO - EASTERN DIVISION 3 MICHAEL J. KNOPIK, et al., 4 Plaintiffs, JUDGE LAMB 5 - v s -CASE NO. 6 PENN CENTRAL COMPANY, et al., 7 Defendants. 8 9 10 Arbitration hearing held in the 11 above-captioned matter taken before Sandra L. Mazzola, a Registered Professional Reporter and 12 Notary Public within and for the State of Ohio, 13 14 at Stouffer's Tower City Centre, Public Square, Cleveland, Ohio, commencing on Thursday, May 3, 15 16 1990 at 9:50 a.m. 17 18 MEHLER & HAGESTROM 19 Court Reporters 1750 Midland Building 20 Cleveland, Ohio 44115 216.621.4984 21 FAX 621.0050 800.822.0650 22 23 24 25

that the position of the carrier was that those
other two people that were part of the crew,
when they were working at the Cleveland Union
Terminal location, were covered by the merger
protective agreement?

- 6 A. I would say they were not as Cleveland --
- 7 Q. Didn't you just tell me that they were?
- 8 A. I'm trying to think it out myself.
- 9 Q. Okay. Let me ask you this. Were there jobs
  10 available for those who returned to work at the
  11 freightyard?
- 12 A. Yes, there were.
- 13 Q. They all got jobs?
- 14 A. They could have, yes.
- 15 Q. They all could have gotten jobs, is that your testimony?
- 17 A. That's my testimony.
- 18 Q. And they all could have gotten full-time jobs?
- 19 A. I believe they could have, yes.
- 20 Q. What's your understanding of the term, stand for 21 a job?
- 22 A. That was a vacancy which they could cover.
- Q. And in order to be able to stand for a job,
  there had to be a job available to you, isn't

1	IN THE UNITED STATES DISTRICT COURT
2	NORTHERN DISTRICT OF OHIO - EASTERN DIVISION
3	MICHAEL J. KNOPIK, et al.,
4	Plaintiffs,
5	JUDGE LAMBROS -vs- CASE NO. 69-722
6	PENN CENTRAL COMPANY, et al.,
7	Defendants.
8	
9	
10	Continued arbitration hearing held in the
11	above-captioned matter taken before Sandra L.
12	Mazzola, a Registered Professional Reporter and
13	Notary Public within and for the State of Ohio,
1 4	at Stouffer's Tower City Centre, Public Square,
15	Cleveland, Ohio, on Friday, May 4, 1990 at
16	9:10 a.m.
17	
18	MEHLED C HACEGERON
19	MEHLER & HAGESTROM Court Reporters
20	1750 Midland Building Cleveland, Ohio 44115
2 1	216.621.4984 FAX 621.0050
22	800.822.0650
23	
24	
25	

1 2 3 4 5 6 7 8 now. It definitely covers them, yes. 9 10 Q. 11 12 A. Yes, it does. 13 Q. 14 15 16 Α. Wage guarantee. 17 Q. 18 19 severance. 20 Q. 21 22 23 24

25

whether you can -- read it first and then give me your opinion as to whether you think that makes clear that the merger protective agreement applies to the C.U.T employees.

MS. TRICHARICHI: Is that his opinion now as he reads it or his opinion then? MR. KERSHNER: Then as well as

- The merger protective agreement provides for certain benefits for employees, doesn't it?
  - Do you know what some of those benefits are?
- Protection of job assignments and guarantees.
- Is there a wage guarantee?
- Are there any severance payments provided?
- I think there were. Operation allowances and
  - You've heard some testimony from the witnesses respecting the payment of guarantees. the procedure that was utilized to obtain payment of a guarantee? How would I as an employee obtain a guaranteed payment?
  - Well, I think Mr. Steimle stated that he put in

1 2

several claims for guarantees and would submit them at the yard office to the yardmaster in charge, as mentioned, with his regular time slip.

- Q. Is there a form to be used?
- 6 A. There is a form to be used.
  - Q. What did the form say, do you recall?
  - A. Well, it had a list of 30 or 31 days and they wanted to know the jobs you worked and any meal allowances and et cetera.
  - Q. Now, when I submit one of these requests for a guarantee -- is that what it was called, by the way, a request for a guarantee?
  - A. I don't recall the nomenclature on top of the sheet.
  - Q. When I submitted one, would I get a response back?
  - A. If you submitted one, which would be submitted on the division level at that time to the timekeeper's office on the division, and they would determine that you had a guarantee coming, it would be handled at that level. If not, it would be denied.
  - Q. So I as the employee who applies for the guarantee would know whether it was granted or

denied?

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

- A. That is right. You would know.
- Q. Now, how can I know whether I'm entitled to a guarantee? How do I know what my guarantee is in the first place?
- A. Well, the information was prevalent around the properties that there were guarantees, and if an individual thought he had a guarantee, if he had been working prior to these dates which are indicated in the agreements, and if he received a wage which he felt was lower than a guarantee that he might possibly have, he could submit a guarantee time slip or a guarantee sheet.
- Q. Were the guarantee posted, were peoples' names listed posted someplace?
- 16 A. No, they were not.
- 17 Q. This was confidential?
- 18 A. This was confidential information.
- Q. So if I wanted to know my personal confidentialguarantee, what would I do as an employee?
- A. Well, I think it's stipulated under the merger protective agreement in appendix E, the route you would take -- one of the routes you could take to find out what your guarantee was.
- 25 Q. What is that route?

24

25

Let's see. Exhibit C, Appendix E, second paragraph. Upon request the merged company will furnish an operating signatory authorization for any employee appearing on the rosters in appendices B and C information respecting his current rate of pay, compensation paid, hours worked during a base period computed of the last 12 months in which he performed compensated service immediately preceding May 15, 1964, all elements of compensation received from the merged company including vacation pay, arbitration, pay for time lost and so forth, but excluding payments made on account of personal injuries, but such payments for reasons other than time lost will be included in determining compensation referred to below.

- Q. So if I'm an employee, I do what, go to the union and say what's my guarantee?
- A. That was the route, yes. Yes.
- Q. Are you of aware of any claims for guarantees filed by any of the claimants --

MS. TRICHARICHI: Claims for requests for guarantees, is that what you mean?

- Q. Requests for guarantees filed by the claimants.
- A. In my position at that time I can only recall

one.

6

7

8

9

14

- $2 \mid Q$ . And who was that?
- A. That was a brakeman switchman by the name of J.J. Boris.
- 5 Q. Was his request for guarantee denied or granted?
  - A. As I recall, it was denied. As I recall, it was listed for a day that he voluntarily marked off from service and he claimed the guarantee for that day and it was denied.
- 10 Q. Now, in your capacity as assistant

  11 superintendent of labor relations would you know

  12 about all applications or requests for

  13 guarantees?
  - A. Would you state that again?
- Q. Would you in your capacity as assistant

  superintendent of labor relations be aware of

  all requests for guarantees that might be made?
- 18 A. Oh, definitely not.
- Q. Would you only know of those that might beappealed to you?
- 21 A. It would be second level of appeal, yes.
- 22 Q. Was the individual you've just mentioned, was 23 his appealed?
- 24 A. It was appealed.
- Q. Were there any other appeals of the claimants

.

1	IN THE UNITED STATES DISTRICT COURT
2	NORTHERN DISTRICT OF OHIO - EASTERN DIVISION
3	MICHAEL J. KNOPIK, et al.,
4	Plaintiffs,
5	<u>JUDGE LAMBROS</u> -vs- <u>CASE NO. 69-722</u>
6	PENN CENTRAL COMPANY, et al.,
7	Defendants.
8	
9	
10	Continued arbitration hearing held in the
11	above-captioned matter taken before Sandra L.
12	Mazzola, a Registered Professional Reporter and
13	Notary Public within and for the State of Ohio,
1 4	at Stouffer's Tower City Centre, Public Square,
15	Cleveland, Ohio, on Friday, May 4, 1990 at
16	9:10 a.m.
17	
18	MEHLER & HAGESTROM
19	Court Reporters 1750 Midland Building
20	Cleveland, Ohio 44115 216.621.4984
21	FAX 621.0050 800.822.0650
22	000.022.0000
23	
24	
25	
	1

- I said what dangers if any were involved in the 1 Q. freight operation that were not involved in the 2 3 passenger operation, if any?
  - Maybe an occasional setting of hand brakes on freight cars where they have to climb on the freight car as against not having to do that on the passenger car, but they had hand brakes on passenger equipment also.
  - You already indicated that the number of tracks in each yard, particularly the Collinwood yard being broken down into four different yards, were about equivalent to the number of tracks in the terminal.
  - Well, the Cleveland Union Terminal? A.
- 15 Q. Yes.

4

5

6

7

8

9

10

11

12

13

14

16

17

18

19

20

21

22

23

24

As I recall -- the experts down there, Beedlow and that bunch, would know. I think there were eleven in the coach yard and eleven or twelve in the station itself. How close is that, Ray? MR. BEEDLOW:

Fairly close.

- Was there any difference in your judgment Q. between the visibility in areas that C.U.T employees worked as opposed to the areas in which freight people worked?
- 25 Well, in the C.U.T under the cover of about ten

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23 24

25

or eleven or twelve tracks, why, it was probably easier to see because the men walked along the platforms and they were under cover away from the weather.

- What about out in the GAR and the mail hall?
- Well, there was shorter cuts of cars so they wouldn't be strung so far out as 50 or 40 car lengths.
- What about training for the employees, particularly safety training? Mr. Beedlow indicated that there wasn't any safety training for the freight employees yesterday. agree with that?
- When a man hired out, you just didn't put him on a crew to go out and switch cars or to work with a crew. He was put with a crew, but first of all, he would be shown how to handle the switch, how to give a signal, how to tie a hand brake.
- Were there any training classes for employees? Q.
- A. If they hired a group of men, they would have training classes.
- Did people who were to go to the freightyard as Q. well as the passenger yard go to the same classes?
- Α. They could. I don't know whether they did or

not. They could.

- Q. Were there any safety meetings?
- A. There were safety meetings. Every yardmaster by bulletin was supposed to have a safety meeting and read a safety rule of the day to the employees.
- Q. Did the safety rules of the day apply to both the freightyard as well the passenger terminal?
- A. Yes, it did.
- Q. Were there safety books issued to employees including the claimants?
  - A. Safety books were issued to the employees and there was a -- certainly, there was an insert inside which they had to sign which went with their personnel record.

MR. KERSHNER: I don't intend to make this an exhibit. I just want to have him look at it.

- 19 A. This was effective July 1, 1968.
- 20 Q. And that was safety rules for employees?
  - A. Safety rules for train locomotive and other transportation employees of the Penn Central.
  - Q. And was there one that applied to freight and one that applied to passenger or did that apply to both?

It applied to both. Road and yard service 1 2 employees and train and engine service. 3 MR. BLACKWELL: The date on that, 4 Mr. Ellert? Yes. July 1, 1968. They had other colors 5 6 before this. Are you aware if any of the claimants worked in 7 the freightyard prior to 1968, prior to the 8 9 merger? I didn't hear the question. I'm sorry. 10 11 Were you aware if any of the claimants worked in Q. 12 the freightyard prior to the 1968 merger? 13 Α. Yes. 14 Which ones, do you recall? Q. 15 There was -- before the merger there was four or A. five that -- or six that went out to the 16 17 freightyard prior to 1968 on their own volition 18 and went to work in the freightyard. 19 MS. TRICHARICHI: I really didn't 20 hear. Four or five or six before 1968? 21 '68, To elaborate on that, there was three or 22 four that went out there prior to the February 15, 1965 agreement and got seniority in the 23 24 freightyard prior to the 9-10-64 date, and that

was brought to the attention of the organization

25

			- The second sec
to the second second			
		To the same of the	
		The second of the second	
		The state of	
the first of the second state of the second st			
the state of the s	section and a mount there is	# 1000	
The contract of the contract o	100 1100 11 1100		Hienivola
	20		PA IN SPIN
manufaction and the second process and to be being	The state of the s		04 han 1300-432
The school and subject to sed to produce apone			La large gate - tak
Date and odds as upons			THE PERSON NAMED IN
			O. Co.
particular to the second of			
34 600072)			
THE STEERS AND UNION TERMINALS	a de la companion de la compan		
CO. TOP THE PARTY OF THE CO.	THE THE OR ALING	LE STATE OF THE	TOPE !
	30	<b>1</b> 3 3 3 3 3 3 3	1303
THE REPORT OF THE PARTY AND CO.	של מילול יישור 2000 מיים מיים מיים מיים מיים מיים מיים מ		
The second secon	and smeared an art of the		
	Second leavest to and the later to the leavest	Many of the design	
	Section of the sectio		ALMINELD
	SO TO SO THE SAME OF THE SAME		A 10 40C
13 01 7305	A TO THE PARTY OF THE PROPERTY OF THE		
to appendix the appendix security and the security and	क्रिक्ट से प्राची के जीन	Design the second	Total Street
and the second s	100	Description of	- Selon
・ 「「「「「「「「」」」」、「「」」、「「」」、「「」」、「「」」、「」、「」、「	District of the second of the	was pired endfely grow	740 (467 612
MONTH RIDGENIELE CHIO	The black models of the barriers		Marie Ma
the man to the second at the control of the second of the	Add 70ts flow to synger in flowing the	and to be received to the	THE PARTY OF THE P
Type of print SMR-CVEP'S nome and address above	ere the same of weight shown larger to	A PLANT COMMEN	AL DES BASES PAGE
ADES M.S. U.S. Tracery Bankhand, Internal Service Service		the less insurance but his an	
	The second second		112
		644 - W. L. 1893	TOPAL
THE REED 13 6001599			
DEFINITION OF SHEET	WALL HAD IN	SAFEREN	nce e
<b>发现了一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个</b>		" Demonstra	
THE REPORT OF THE PARTY OF THE	Comment of the commen		Stational Transport
A Secretary and the property of the second control opered.			
The state of the s		- F49.	
App 3/ reg	The second of th		
	Note:		
		TO THE PARTY OF THE	
ACRES DO NOT THE REAL PROPERTY.	- House and the second		
AGREE AT THE REPORT OF A	THE TOTAL PROPERTY OF THE PARTY		
NORTH RIDGEVILLE ONTO	Der Mild, is beginn in manner of		
and the set by all series (the most most make the series of the series (december in	-		
The control of the co	If from orders have subject to make a good party from states from tolerandom, here not perfy from the states f		
			THE PARTY OF THE P

PCC03189

	. 1
THE SEPTEMBLE OF THE	MAN
	CO. CALLED TO SERVICE STATE OF THE SERVICE STATE OF
	O DATE FOR THE SECOND S
THE REPORT OF THE PARTY OF THE	
	BLDC the state of
Description of the control of the co	
	AD PATRIC 1997 (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997)
NAME OF THE PARTY	

		4200		
All the second s	PLANE OF STATE	WANT FORWAD.		
293 07 73	305 ma a an	CIV FORMING	CD V YAN DANIEL OF	
	TAN CONE THE PROPERTY OF THE P	perions in a series of series		
Type or print EMPCOVER triains, and address (including ZIP code) a			tigen (n. 1665), and 2,000 (n. 1665), in his send spilley being big are pay china they had not story than \$2,000	
THE RESIDENCE OF THE PARTY COMPANY				
THE RESERVE OF THE PROPERTY OF	Aller Carrier	WAGE AND TAX	Acres de la lace de la companya de l	1967
	Other coversation		CPPly Ambiore	Lindardi Lin
He of the Completion 4123: 11	AUX	MONTH IN THE PARTY OF STATE		
ACAGE	<u>Ci</u>	EVELAND	ON THE	47.87
MURIO MEDIENTELE CH	(I O	COLUMN CONTROL OF THE PARTY OF		
Tipe, or pro: EMPLOYEE'S name and address (including 2)	P codel above	to 191 poorted to englance 9		

	EP S U	the second secon		<b>这是是不是一个人的,但是一个人的人的人的人的人们是一个人们的人们的人们的人们的人们的人们的人们的人们的人们的人们的人们的人们的人们的人</b>
		Na.		
	NSPORTATION COMPANY			
The state of the s	17 17 17 Walt - 23 4000 24 6	MAGE AND	TAL STEEL STATE	
ROOM 815, 13 HORTH	32nd STREET PHILADELPHIA PA 19164			
A STATE OF SECTION OF STATE OF	S localification number, name, and addises a	Copp	C TO SERVICE STATE OF THE PARTY	
ALC: NO.	THAT INCOME TAX INFORMATION			
Pedarot income (gr withheld	Chille Con Contract to with Other Con	Control of the Contro	A CONTRACTOR	
	shouthe in 1969) fice pold.	1940		
	8140.80	10 T 3 10 10 10 10 10 10 10 10 10 10 10 10 10		
THE SECOND	pages security number	The state of	2.7	
	293-09-7		The state of the s	The same of the sa
			an residence of the second	
TELL VELCE		Value of the same	a decimal	SE 38 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
A SECTION SI	SAR RIDGE AD ASSIST			
TO SERVICE STATE OF THE SERVIC	AGENTLY ON TO			
<b>建筑地区</b> 工作之				
TOTAL CONTRACTOR	point and passage (lithelling 29 alastistes)			
THE PROPERTY OF THE PARTY OF TH		<b>建筑的大型的</b>		

*• 6. AUA YURK, PEA . 23 639	4A. 17-05		•			STATEMENT	1969
				THIS STATEMENT IS IN	THATSON	thin production is no product. Income NICE TO SMILDING. IT MUST BE ATTACHED TO YOUR STATE OR C TO CLAIM CEEDIFFOR ANY TAX WITHIED.	Tax Refuen N
Pederal Tax Windows	PACOME TAX REPORMATION Woges Poid Subject To Watholding in 1940*	Other Comparison on Find in 1989?	FLCA employee too withheld?	SITY PHORMATION	STATUS 1.5	Grow Wages, for State  # different from Federal	<del></del>
1.491.05	10,249,66	82.50	374.40	7856.60	p		$\mathcal{J}$
Type or print (				CITY TAK WITHDING	STATE	AI Winest D	- 1
ACCUPACION AND ACCUPA		10 15 73 var		7.28			
ALK I	F ALRES			HAME OF STATE		STATE POINT NO.	
	r AUREL Ar H10G: Ru			HAME OF ORY	1975		CARLOS CAR
- 81666V-i	Lit, Ort			-LEVELAND		COT HOME HO	
	• •		. h			73-0494930	TO COMMANDE
Tunn ne nei-t Et	MDI OVERN			A NEW B		NC.AT	
Type OF Drint EA	MPLOYEE'S name, addre	s (including ZIP code)	obove.	EXCLUDABLE DOL PAY	!	-Jak Connected Instantif Instantial	- [
		معتد عليست جاء					لبيات
# 38 TO 1.	「 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			- 13.5.7.5.7 <b>7</b>	7.7	the second secon	
PENN CEN	TRAL TRANSPORTA  15 NORTH 32nd STREE EMPLOYERS	~	2 4000	V	161	AND TAX	
PENN CEN ROOM 815, 1 Type or pont	15 NORTH 32nd STREE EMPLOYER'S Identifican	P. PHILADELPHIA, PA	3-4000765 19184	W		AND TAX	1969
PENN CEN	15 NORTH 32nd STREET EMPLOYER'S Identification PEDERAL INCOM- Track least 1997 Per page 1997 The least 1997	P. PHILADELPHIA, PA.	3-6000765 19184 	m.		THE PARKS	
PENN CEN ROOM \$15,   Type or pdni Pedarol bean	15 NORTH 32nd STREET EMPLOYER'S Identification PEDERAL INCOM- Track least 1997 Per page 1997 The least 1997	P. PHILADELPHIA, PA	3-6000765 19164 oddona obo	- Labora			269
PENN CEN ROOM 815. Type or print Pederal become withhele	15 NORTH 32nd STREE EARIOYER'S Identificat FEDERAL INCOM	P. PATILADELPHIA, PA.  The number, name, G.  E TAX INFORMATION  Id subject to with-  ng to 1989:	3-6000765 19184 	- Loca		THE PARKS	(69)
PENN CEN ROOM 815. Type or print Pederal become withhele	15 NORTH 32nd STREE EARIOYER'S Identificat FEDERAL INCOM	P. PATILADELPHIA, PA.  The number, name, G.  E TAX INFORMATION  Id subject to with-  ng to 1989:	3-6000765 19164 oddona obo	1740 ASSA		TIA TON	1469 144 144 144 144
PENN CEN ROOM 815. Type or print Pederal become withhele	15 NORTH 31rd STREE EMPLOYER'S Identificati PEDERAL INCOM Weeper poi	P PHILADELPHIA, PA  TO RUMBER, NAME, OF  E TAX INFORMATION  I Subject to with  no to 1989  LAG. 80  Y member	3-4000765 19184 ordeless about Other comp from polid to				. 269
PENN CEN ROOM 815. Type or pdat Pederol Inco withhele Type or pdat 5	15 NORTH 32nd STREE EARIOYER'S Ideophicon PEDERAL INCOM Wester policy displayed by Jordan MACOYER'S booled growth	P PHILADELPHIA, PA  TO RUMBER, NAME, OF  E TAX INFORMATION  I Subject to with  no to 1989  LAG. 80  Y member	3-6000765 19164 oddona obo				.09
PENN CEN ROOM 815. Type or point Pederal local withhele	IS NORTH 32nd STREE  EARIOVER'S Identification  FEDERAL INCOME  Wooder Proper part  ACREE  AC	PHILADELPHIA, PA John number, name, of E FAX INFORMATIO Id subject to with- ng to 1989  L90 80 Triviaber  7 93	3-6000765 19164 of oddern obc Other com-				. 100
PENN CEN ROOM 815. Type or point Pederal local withhele	IS NORTH 32nd STREE  EARIOVER'S Identification  FEDERAL INCOME  Wooder Proper part  ACREE  AC	PHILADELPHIA, PA John number, name, of E FAX INFORMATIO Id subject to with- ng to 1989  L90 80 Triviaber  7 93	Office Policy Po				
PENN CEN ROOM 815. Type or point break withhele Type or point 5 37.04 10.87	ACRES SUGAR STATE  ACRES SUGAR SCALL  ACRES SUGAR SCALL  A LINES SUGAR SCALL	PHILADELPHIA, PA John number, name, of E FAX INFORMATIO IN SUBJECT TO WITH- INDICATE	One polity  03-73-0				.139
PENN CEN ROOM 815. Type or point be withhele Type or point be 37.04 ADRY	IS NORTH 32nd STREE  EARIOVER'S Identification  FEDERAL INCOME  Wooder Proper part  ACREE  AC	PHILADELPHIA, PA John number, name, of E FAX INFORMATIO IN SUBJECT TO WITH- INDICATE	One polity  03-73-0				

	NURTH PIDGEVILLS CITY SCHOOLS 35895 CENTER RANGE RUAD NORTH PIDGEVILLS, OHIO	<b>4403</b> 9		002304		IAKE NO ENTRY	
Profession is the	93-07-7305 735-82	1	121.85	eth top astroit	319	a Parit and	
the entire the same	37096 SUGAR RIDGE N RIDGEVILLE, OHIO 44039		56.1	5 9,12	1.85	OHIO Sherroom.	
يراني مير دونيار كا	Wage and Tax Statement	197B	Copy A—For So		1,85 ministrat	ion	
	Formw2 I.R.S. APPROVED	36-1894725		Department al	De Îraaw)	Stiernaf Hoyamie Service	J Hack
	2000 Humbur 2000 2100	yes a State and	riske The second	FER OFFICE	AI USF I	DEL A	AND SECTION OF THE SE

SHAPE OF	NORTH MILGI.				n n			İ	
量.	CITY SCHLOF?				monthly of the second	1			
	) 35885 CENTER ENDRIE KILGEV		44039	3 600 849 18	-6002304	1.	•		
鎌			77037	P C   P 4 4 7 ( m. )	E471767 ) .	1	<b>5</b>		á
5.4	plantage took nearly were at a factor for the	9 Facer at income tax 12-4" factor	10 W sps \$40 E	- L	H HCA to a school	78 12 3	12 17 A .		3.4
	293-07-7405	£66.29	9, 69	0.63					Ž.
	13 Empleyes's pane (brst. middle.	1991)	77.60	PAR 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	٠٠. ٠٠.	35 TEV	3 4.	素	3
	JACK & ACREE					1		1	a a
16	37056 SUGAR		13 31.		19 SINA PARE	945 PB	1.00		ŝ
	EN RIDGEVILLE	, util	L.	62.73	9,8	40.63	בגוונו		g L
	344035		23.150		wa Zitacai maras,	D01, D1C	1124	" T	Í
	<u>.</u>		]	78.51	9,0	20.113			Š
		* 9×40 *	.,			: .		1	
	It applying actions and It's con		<del></del>						
繼	AT MARE BING	Tax Statement 19	9 <b>79</b> Nationalists	**********	CDPY A For B	<u> </u>	rity Adminis	itration (	
					Paperheal of the Sons	the second ten		30	
336	₹.						<b>*</b>	1	
	t From thoseha	12 hazina	مورد براد د و و ۹ و د	7				<u>_</u> 5	
	}	55555							
}		. •	**	: .					

	55555	D 3 8 2	501	ם מ ס כ	43
NORTH RIDGEY CITY SCHOOLS		34-600230	4		
35895 CENTER NORTH RIDGEV	RIDGE ROAD ILLE, OHIO 44039	1 2 2 2 2 2 2			
293-07-730	977.03	10,528.50		4 4 M	
JACK F ACREE	tion fig.	to Asses			
N RIDGEVILLE,	OHIO	D. Waterstein tax (%) 12:			
	6	70.41 1	0528.50	OH10	
15 Dypho, and a Wage and T	ax Statement 1980 Cory Par See		0528.50	n in a second	
	Plant b.	e rate i samita i tita i t Tita i tita i	3-19-75		
A televania to de la	55555				v.

Printing Legal Service Sub-10 Region Vold Motice to Employee: 4 Employer's State number 14 FICA UP. TTVO CIONS Dioyee cessed plan (1988) 1117-882 Sub- rection 1 Void This information is baing turnshad to the informal Revenue Service. Department of the Trasury-iRS Capy Citiz your in-11 PIGA ter withheid Ind. Part of the transmission o or by hour Copy C For umplokee's records Advance (16 payment (1) 16.26) If FICA lax withheld 18 Suiv wages, 193, sec. 139 Name of State

19 3 14 (197 - 1194 )

21 tand wages, 193, sec. 132, Name of Dooilly 1 1 7 7 2 5 15 1 19 Nome of Stell 5 SOLVECTS THE WITH 2100 HE XOVOI. YOUNG BILL GALLON 14 your many ing Fig. (1989) and you all the first state of the first 2 Employer's identification number | 4 Employer's State n הים סמיין ווסא Copy C For employee's necords . . . . This information is being formance to the Internal Revenue Service, 21 tezel wagen, ilgn, uit. 1 11.77 Sick in THE BUNGET OF THE Employer's Identification number \*\* 10 Wages, 1195, office componsation Acris (1) 16 Employer's use 11,7 17 State Income tea 17 Sizie indome lex 18 Employers use 20 Local Income lax 13 FICA Weges 447030 Federal income tax withheld 21.5 Form W-Z Wage and Tax Statement 1981 Employer's name, address, and ZIP code 2 Employer's name, address, and ZIP code reim W.2 Wage and Tax Statement 1982 BRIOR CENTER OFFICE 经工程的 经证据基础的 人名斯巴斯巴 I Employee's name, address, and ZIP code N PIPERFUE, THE . Triandit. 15314 35565 96023 1 Control number TANK STANKE " IDINGSE ALLO 6 (mplayer's social security number

		Auditor of enditure	•	" WITHHOLDING		
	Room ADY, Michi	gan Control Terminal Bld	4 <sub>3</sub> .		mheld from Wog	
Print techon		MICHICAN 88716		Conv	Compan Form	loyee's Records
		TY INFORMATION		INCOME TAX INFORMATIO		oyee's Necords
PATAON ASS. 140	F.L.C.A. employee ton Wishheld	Paral F.I.C.A. Wages	Federal Income For Winhold	NOW HE	Javal Wages#	100
		poid in 1964	3 000)	<b>BEIGGS</b>	poid in 1964	
1	I NONE I	s inone	<b>3</b>			
3 905 8	E J BENKO		222			
1 July 20		•			21974101	
	13415 HARL	AN AVE	713-14-43	NOTICE IT your weges thom. your Securit Securi	nara sabject to Social Script Fifty mages are the sam ATCOM - Dut may make the	rt versy tears, that one age e-tra magns, shown a serger on to \$70
1	LAKEWOOD 7	OHED				
Type or pont	FMPIOYEE'S woral to	Cwity October no , nome,	and addies share	# sep this	topy or part of year t	as heroids
FORM W-7	-01 Ireasury-Departs	mont, Internal Rossans Sarut		payre's deductions or l'sich po	y" exclusion	App. 185, 8-7244
<u> </u>					-	F
1						
THE CLEVED	ND UNION TERMI	NALS CO.:NO. 3 4 6	000713	WITHALAMA	TAV CYATEMEN	
	Office of District Aud oom, 907, Michigan (	liter of Expenditures		WITHHOLDING Federal Taxas Wi	IAA SIAILMLI theid from Wose	
1 1 1 m	DETROIF, MICH	HGAN 482]6				3 3 3 4 4
PRINCEMPION		mber, name and uddress of	pbeve.			oyee's Records
PAYROL	Fr CA employee	Total F.C.A. Wayes	Formal Income	INCOME TAT UNCOMATION		
#855, AvG	igu Miskingsaf Bang	APPE IN BIOG	Tax Winhale it cay		Tarol Wagers paid in 1964	1 - 344
1	! NÜN! :	PIONE I	,	1993,099		1
6013		· · · · · · · · · · · · · · · · · · ·		55×566		
<b>6912</b> _F	J BENKO	•	1247,		<u> 4.365.461</u>	
1	1341 5 HARL	AN AVE 7	713-14-434	MONCE IT you make you	ere úbject to Social Se ty junger ere the som	tively tores, bull are see. I have ages shows some
	AKE HOOD 7	OHIO			TOTAL BUT NOW AND A NA	- 14.100
			-			
				Keep this	copy on post of your s	De records
FORM W-2	-U.S. Treesury Departs	number of the state of the stat	und addies above	I		1
FORM W-2	C-U.S. Treesury Departs	ment, Internal Barance Servi	und addiess show			De Imords; App. 1,95. 63346;
FORM W-2	C-U.S. Treesury Departs	mant, Internal Bureaus Suci	und addiess share			App. 3,95. 63344;
THE, N.Y	-C.R.R. C		1 200	poyroll deductions on such pu		App. 3,95. 63344;
THE N.Y	-C.R.R. C	O. 13-600 CT AUDITOR	1 200	pografi deductions ou siçt più	orchusion .	**************************************
THE N.Y OFFICE EXPENDS	-C.R.R. COF DISTRI	CO. 13-600 CT AUDITOR COM 907 TERMINAL	1599 OF	WAGE AND TA	X STATEMEN	1965
THE N.Y OFFICE EXPENDS MICHEGAN	-C.R.R. COF DISTRITURES R	O. 13-600 CT AUDITOR DOM 907 TERMINAL	1599 OF BLDG	WAGE AND TA	X STATEMEN	1965
THE N.Y OFFICE EXPENDIMICHEGA TO THE TO THE TOTAL THE TO	-C.R.R. COF DISTRITURES R MICHIGA	CO. 13-600 CT AUDITOR LOOM 907 TERMINAL N 48216 MONANCE OF CONTROL	1599 OF BLDG	WAGE AND TA	STATEMEN	1965
THE N.Y OFFICE EXPENDS MICHEGAI DETROST HOUSE OF PRESENCE HOUSE OF	-C.R.R. COF DISTRITURES RICHIGAN CONTRACTOR SHOWN TAXING	CO. 13-600 CT AUDITOR LOOM 907 TERMINAL N 48216 MORANGE MORANG	1599 OF BLDG	WAGE AND TA	STATEMEN	1965
THE N.Y OFFICE EXPENDS MICHEGAI PROSE HOUSE OFFICE HOUSE OFFICE HOUSE HO	-C.R.R. COF DISTRITURES R M CENTRAL MICHIGA AND 183 derification 1937 1938 1938 1938 1938 1938 1938 1938 1938	CO. 13-600 CT AUDITOR LOOM 907 TERMINAL N 48216 TOWNER, HOW CORD ONLY TOWNER, HOW CORD O	1599 OF BLDG	WAGE AND TA	Z STATEMEN	1965
THE N.Y OFFICE EXPENDI DE IROIT HOUSE OF PROSECUTION 13311	-C.R.R. COF DISTRITURES R M CENTRAL MICHIGA AND 183 derification 1937 1938 1938 1938 1938 1938 1938 1938 1938	CO. 13-600 CT AUDITOR LOOM 907 TERMINAL N 48216 TOWNER, HOW CORD ONLY TOWNER, HOW CORD O	1599 OF BLDG	WAGE AND TA	Z STATEMEN	1965
THE, N. YOFFICE EXPENDS MICHEGAL THE PROPERTY OF THE PROPERTY	-C.R.R. COF DISTRITURES RICENTES RICHIGAN DECENTRAL MICHIGAN DECENTRAL MICHIAN	CO. 13-600 CT AUDITOR LOOM 907 TERMINAL N 48216 TOWNER, HOW CORD ONLY TOWNER, HOW CORD O	1599 OF BLDG	WAGE AND TA	X STATEMENT  C For sample  or the copy or part of  wanted to have been	1965
THE N.Y OFFICE EXPENDI DETROIT HOUSE OF PROSECUTION 100100 OF PROS	C.R.R. COF DISTRITURES R MICHIGAN MICHIAN MI	CO. 13-600 CT AUDITOR COM 907 TERMINAL N 48216 Combine Common order Committee Committe	1599 OF BLDG	WAGE AND TA  Cop  KEILL SECTION STORMAN  NUME NET	STATEMEN	1965
THE N.Y OFFICE EXPENDI MICHEGAI DE IROIT HORISHOUS 13311	-C.R.R. COF DISTRITURES RICENTES RICHIGAN DECENTRAL MICHIGAN DECENTRAL MICHIAN	CO. 13-600 CT AUDITOR COM 907 TERMINAL N 48216 Combine Common order Committee Committe	1599 OF BLDG	WAGE AND TA  Cop  KENNE SELECT PROPERTY  FOR SHALLOW  NUMBER  MORAH! SER DAY  Are party dealiness on the party  MORAH! SER DAY  Are party dealiness on the party  Representation of the party	Z STATEMEN	1965
THE N.Y OFFICE EXPENDI DE IROIT HOTELSHOES 15311 Type of pict them Social to	C.R.R. COF DISTRITURES R MICHIGAN MICHIAN	CO. 13-600 CT AUDITOR COM 907 TERMINAL N 48216 COMPANY	1599 OF BLDG	WAGE AND TA	Z STATEMEN  Z STATEMEN  Z STATEMEN  LONG COPY OF PROPER  WORLD COPY OF PROPER  WORLD COPY OF PROPER  WORLD COPY OF PROPER  WORLD COPY OF PROPER  LONG COPY O	1965
THE N.Y OFFICE EXPENDI DE IROLT Type of pick there 1531 Type of pick there E	-C.R.R. COF DISTRITURES R. CENTERLE R. MICHIGA ROMES derification and the company of the company	CO. 13-600 CT AUDITOR OOM 907 TERMINAL N 48216 N 48216 OT 41 T13 14 T13 14 N AVE	1599 OF BLDG	WAGE AND TA  Cop  SECUL SK UP TO THE CONTROL OF SHAPE OF	Z STATEMEN	1965
THE N.Y OFFICE EXPENDI DE IROLT Type of pick there 1531 Type of pick there E	C.R.R. COF DISTRITURES R MICHIGAN MICHIAN	CO. 13-600 CT AUDITOR OOM 907 TERMINAL N 48216 N 48216 OT 41 T13 14 T13 14 N AVE	1599 OF BLDG	WAGE AND TA  Cop  SECUL SK UP TO THE CONTROL OF SHAPE OF	Z STATEMEN	1965
THE N.YOFFICE EXPENDIMICATED TOTAL T	-C.R.R. COF DISTRITURES R. CENTEAL MICHIGANOVES DESCRIPTION OF THE PROPERTY OF	CO. 13-600 CT AUDITOR OOM 907 TERMINAL N 48216 N 48216 OT 41 T13 14 T13 14 N AVE	1599 OF BLDG	WAGE AND TA  Cop  SECUL SK UP TO THE CONTROL OF SHAPE OF	Z STATEMEN	1965
THE N.YOFFICE EXPENDIMICATED TOTAL T	-C.R.R. COF DISTRITURES R. CENTEAL MICHIGANOVES DESCRIPTION OF THE PROPERTY OF	CO. 13-600 CT AUDITOR OOM 907 TERMINAL N 48216 N 48216 OT 41 T13 14 T13 14 N AVE	1599 OF BLDG	WAGE AND TA  Cop  SECUL SK UP TO THE CONTROL OF SHAPE OF	Z STATEMEN	1965 Oper's records (source of Author)  197771 Interesting to the second of the second
THE N.YOFFICE EXPENDIMICATED TOTAL T	-C.R.R. COF DISTRITURES R. CENTEAL MICHIGANOVES DESCRIPTION OF THE PROPERTY OF	CO. 13-600 CT AUDITOR OOM 907 TERMINAL N 48216 N 48216 OT 41 T13 14 T13 14 N AVE	1599 OF BLDG	WAGE AND TA  Cop  SECUL SK UP TO THE CONTROL OF SHAPE OF	Z STATEMEN	1965 Oper's records (source of Author)  197771 Interesting to the second of the second
THE N.YOFFICE EXPENDIMICATED TOTAL T	-C.R.R. COF DISTRITURES R. CENTEAL MICHIGANOVES DESCRIPTION OF THE PROPERTY OF	CO. 13-600 CT AUDITOR OOM 907 TERMINAL N 48216 N 48216 OT 41 T13 14 T13 14 N AVE	1599 OF BLDG	WAGE AND TA  Cop  SECUL SK UP TO THE CONTROL OF SHAPE OF	Z STATEMEN	1965 Oper's records (source of Author)  197771 Interesting to the second of the second
THE N.YOFFICE EXPENDIMICATED TOTAL T	-C.R.R. COF DISTRITURES R. CENTEAL MICHIGANOVES DESCRIPTION OF THE PROPERTY OF	CO. 13-600 CT AUDITOR OOM 907 TERMINAL N 48216 N 48216 OT 41 T13 14 T13 14 N AVE	1599 OF BLDG	WAGE AND TA  Cop  SECUL SK UP TO THE CONTROL OF SHAPE OF	Z STATEMEN	1965 Oper's records (source of Author)  197771 Interesting to the second of the second
THE N.YOFFICE EXPENDIMICATED TOTAL T	-C.R.R. COF DISTRITURES R. CENTEAL MICHIGANOVES DESCRIPTION OF THE PROPERTY OF	CO. 13-600 CT AUDITOR OOM 907 TERMINAL N 48216 N 48216 OT 41 T13 14 T13 14 N AVE	1599 OF BLDG	WAGE AND TA  Cop  SECUL SK UP TO THE CONTROL OF SHAPE OF	Z STATEMEN	1965 Oper's records (source of Author)  197771 Interesting to the second of the second
THE N.YOFFICE EXPENDS MICHEGAL TO SELECT THE COLUMN	-C.R.R. COF DISTRITURES R. CENTEAL MICHIGANOVES DESCRIPTION OF THE PROPERTY OF	CO. 13-600 CT AUDITOR OOM 907 TERMINAL N 48216 N 48216 OT 41 T13 14 T13 14 N AVE	1599 OF BLDG	WAGE AND TA  Cop  SECUL SK UP TO THE CONTROL OF SHAPE OF	Z STATEMEN	1965 Oper's records (source of Author)  197771 Interesting to the second of the second
THE N.YOFFICE EXPENDS MICHEGAL TO SELECT THE COLUMN	-C.R.R. COF DISTRITURES R. CENTEAL MICHIGANOVES DESCRIPTION OF THE PROPERTY OF	CO. 13-600 CT AUDITOR OOM 907 TERMINAL N 48216 N 48216 OT 41 T13 14 T13 14 N AVE	1599 OF BLDG	WAGE AND TA  Cop  SECUL SK UP TO THE CONTROL OF SHAPE OF	Z STATEMEN	1965 Oper's records (source of Author)  197771 Interesting to the second of the second

THE CLEVELAND UNION AMINALS OFFICE OF DIST. AUDITOR OF CO	****		·		
MICHIGAN CENTRAL TERM	WAGE	AND TA	X STATI	EMENT	1965
		(°)	x C-Fo	emplé,	a's Acord
PHOTO OF THE CONTROL OF T	10CIM-DCum	¥ 64	p the copy	os part of ,	our res records
Two series	Jac antimotio	1012 + ( A )	4-C13 1 12	CAE .	HAN IN ON
61 7 63 7453 73	a due	<u> </u>			Tan Military D
200 of security number - 713   14   4349	NONE	NO!	E :	- 1 ::-	<u> </u>
	1		:-	1	
E J BENKO	TAIL HAVE	i-	101		. i.
13415 HARLAN AVE LAKENDOD 7 OHIG	Before topical description	o "se's gan' souls	I has well-spot		- 3
Tank and the first of the first	The Heat work at Differ	iguidade ()	o se in estimate differ endeter	40,0	t language,
Type or print EMPLOYE'S notice need nodress above	interes for titles.		17 54 155471		nd salarias an year
FORM N. 2.—U.S. Transacy Department, internal Revenue Service	the tap store at makes age of the	ind to special species a under Tribage is	T 19009, the lare It follows		said about a sun
	L		<u></u>		te go
•				. : .	
A CONTRACT OF THE PROPERTY OF	***********		* - p +		
THE NEW YORK CENTRAL RAHROAD COMPANY		-	:		
OFFICE DE DISTRICT MINISTER OF THE	WAGE AN	D TAY	TATE	RF.2'0=	
	WAGE AN	- IMA	HILM	IEN)	1967
DETROIT, MCBGAS 40216  Type or print EMPACYEE'S identification number, name and addition above.  HOW IN DEPARTMENT AND ADDITIONAL PROPERTY ADDITIONAL PROPERTY AND ADDITIONAL PROPERTY AND ADDITIONAL PROPERTY ADDITIO	Сору, т	No. 3—To	be lile	- 444	
	I I I I	31016	City In	come T	mplayee's Ex-Return
PAID IN THE PAID I	FICA IMPORT	PAG STIPE	JYAYI	COOK	WACET AGE STAW
Type or print EMPLOYEE'S	NONE	NON		•	WHI MOW MORA
10ciol socurity number 713 114 4349	MANG O' STATE	U - TI FOR		37-12 120	300 auro
	new Dr Oh	CP1 PORM			
E J BENKO	CLEVELAND	CITI FOLL		CITTA	мілиар
13415 HARLAN AUG	- SWITTOWED INCOME.				9 97.
LAKENGOD 7 DHIG	TAR CONTRA				
Type or push EMPLOYEE'S name and address fincluding I'P rades whom.	THIS STATEMENT IS MADO ME OFFI THE BUT STATEMENT FOR STATEMENT OF THE OFFI INDOORS TO	MOTES TO	EMPLOYES		<del>ماري مينده.</del> داري داري
The bookest firefuling IIP each obove.	SOUTH THE PARTY OF THE PARTY NO.	OFDER TO CLA	w (5101) to	ANT TAR	STATE OF CHY
the state of the s		TENS YOUR COME	LEAN '		
		YEVS COPY COMP.			
		TENS COPY COM		· · · · · · · · ·	
THE STAND PRICE TERRITIALS Grap any		ARIS CON COM			
THE COMPANY OF THE PARTY OF THE PARTY				· · · · · ·	
OTHER PERMIT AND TO THE PERMITTER				T 10	
OFFICE OF DISTRICT AUDITOR OF DETROITURE OF DISTRICT AUDITOR OF DETROITURE OFFICE OFFICE TRIMBAL BUTCHES DERROIT, MICHERAN BUTCHES	WAGE AND 1	TAX STA	TEMEN	10	) <b>67</b>
OFFICE OF PASTRICE AMERICAN OF DEPTHOTURES ROOM OF MICHIGAN ARTICLES R	WAGE AND 1	AX STA	TEMEN	h Emple	167
CONTROL MUNICIPAL PROPERTY OF THE PROPERTY OF	Copy No.	AX STA	TEMEN	h Emple • Tox R	167
CHIEF OF JUNE AND CONTROL OF DETROTURE ROOM BY MOTHER ARTS  DETROIT, MOTHER ARTS  OF PINE EMPLOYER'S Identification member, come, and adding chore  MOTHER MOTOR ARTS  MOTOR MOTOR ARTS  MOTOR MOTOR ARTS  MOTOR MOTOR MOTOR MOTOR ARTS  MOTOR MOTO	Copy No.	AX STA	TEMEN	h Emple	167
OFFICE OF DISTRICT AUDITOR OF DETROTURED ROOM FOR MODISCAN CHITERITERINES BUT DIRC DETROIT, MODISCAN RATIO  OF DISTRICT, MODISCAN RATIO  OF DISTRICT, MODISCAN RATIO  OFFICE SAMPLOYER'S Identification member, points, and addition, photo-  MICHAEL THOSE MADE THOSE MODISCAN PRODUCTION TO MODIFICATION TO MICHAEL THOSE MADE THOSE MODIFICATION TO MICHAEL DIRECT THOSE MADE TO MICHAEL DIRECT TO	Copy No. 3	AX STA	TEMEN	h Emple o Tox R Gross wage Ometic re	167
OFFICE OF DISTRICT AUDITOR OF DETROTURED ROOM FOR METHOR AND THE MINE SET DIRECTORY OF THE SE	WAGE AND 1	AX STA	TEMEN	h Emple o Tox R Gross MAGE Official Le	167
CONTROL PROPERTY OF DETROITURE OF PROPERTY OF PARTY OF PA	Copy No.  Copy No.  Co terrorial Prints  And the Copy No.  Copy No	AX STA	TEMEN	h Emple o Tox R Gross water Ometic re	167.
CHIEF OF DISTRICT AUDITOR OF DETROTURE ROOM BY MICHES HAVE THE TERMINAL BURDING OF DETROTION OF A CONTROL OF THE TERMINAL BURDING OF THE TERMINAL BURD	WAGE AND 1  Copy No.  DELANCE DESCRIPTION OF THE PROPERTY OF T	TAX STA  2 To be bede on Ci	TEMEN	O TOX R GROSS MAGE OFFICENTIAL	167.
OFFICE OF DISTRICT AUDITOR OF DETROTURED ROOM BY MODERGAN (PATRIAL TERMINAL BUTCOINC)  DETROIT, MODERGAN MARTÍ  TO DISTRICT, MODERGA	Copy No.  Copy No.  Co terrorial Prints  And the Copy No.  Copy No	TAX STA  2 To be bede on Ci	TEMEN	O TOX R GROSS MAGE OFFICENTIAL	167.
OFFICE OF DISTRICT AUDITOR OF DETROTURED ROOM BY MODERGAN (PATRIAL TERMINAL BUTCOINC)  DETROIT, MODERGAN MARTÍ  TO DETROIT, MODERGAN MARTÍ  TO DETROIT, MODERGAN MARTÍ  TO DETROIT AUDITOR OF THE PARTICULAR OF TH	Copy No.  Copy No.  BRITAL KOUNT INCOME.  CA DEPOSIT TO THE CONTROL OF COPY  BASE PROPERTY.  CALCITED LINE OF U.S.  AND OF TES	AX STA  2— To be itale on Ci  1000  The wasts  and in the  CAT FORM HD.	TEMEN	h Emple o Tou R Gross water opperation	167 yyee's efuin NOONING WAD WAD
OFFICE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF DISTRICT A	Copy No.  Copy No.  BELLIKOUN NO.  CA LONGOU FOR AND	AX STA  2—To be  2—To be  2—To be  2—To be  2—To be  3—To	TEMEN	h Emple o Tou R Gross water opperation	167 yyee's efuin NOONING WAD WAD
OFFICE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF DISTRICT A	Copy No.  Copy N	AX STA  2—To be  2—To be  2—To be  2—To be  2—To be  3—To	TEMEN	h Emple o Tou R Gross water opperation	67.
OFFICE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF DISTRICT A	Copy No.  Copy No.  BELLIKOUN NO.  CA LONGOU FOR AND	AX STA  2 To be bede de Ci  DOM PLA MACE DE HAD  THE PROBLEM  OF FORM HO  OF F	TEMEN	h Empli	167
OFFICE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF DISTRICT A	Copy No.  Copy No.  BELLIKOUN NO.  CA LONGOU FOR AND	AX STA  2 To be bede de Ci  DOM PLA MACE DE HAD  THE PROBLEM  OF FORM HO  OF F	TEMEN	h Empli	167 syee's of Num and and and and and and and and and and
OFFICE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF DISTRICT A	Copy No.  Copy No.  BELLIKOUN NO.  CA LONGOU FOR AND	AX STA  2 To be bede de Ci  DOM PLA MACE DE HAD  THE PROBLEM  OF FORM HO  OF F	TEMEN	h Empli	167
OFFICE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF DISTRICT A	Copy No.  Copy No.  BELLIKOUN NO.  CA LONGOU FOR AND	AX STA  2 To be bede de Ci  DOM PLA MACE DE HAD  THE PROBLEM  OF FORM HO  OF F	TEMEN	h Empli	167
OFFICE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF DISTRICT A	Copy No.  Copy No.  BELLIKOUN NO.  CA LONGOU FOR AND	AX STA  2 To be bede de Ci  DOM PLA MACE DE HAD  THE PROBLEM  OF FORM HO  OF F	TEMEN	h Empli	167
OFFICE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF ENTROTURE OF DISTRICT AUDITOR OF DISTRICT A	Copy No.  Copy No.  BELLIKOUN NO.  CA LONGOU FOR AND	AX STA  2 To be bede de Ci  DOM PLA MACE DE HAD  THE PROBLEM  OF FORM HO  OF F	TEMEN	h Empli	167

PENN CONTROL TAX INFORMATION  124 \$ 5.55 \$ 5.29;536 \$ 58;537.26  125 \$ 1.50 \$ 1		3, 13 lacia. Sino mom dalahin, Ro. 1929a	١	WAGE AND	TAX S	TATEN	IENT 🌃	769	
PRINTEDITAL COMPANY 23.0002-765  OFFICE DEFINITION COMPAN	* X22 3	•		Copy C-F	or emp	loyee's	records.	****	3
PEN LITTRAL COMPANY 23-6002-765  DIFFIC GREGORAL	INCOME I	IAX INFORMATION		FEDERAL INC	OME IA	X INFOR	MATION		2
PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PROM (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PROM (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  OFFICE OF REGIONAL COMPROSITE  PEN (DITAL COMPANY 23-600): 765  OFFICE OF REGIONAL COMPROSITE  OFFICE OF REGION	2324.4p	⥠ţ	1			₹	3157.26		- 1 m
PENALONIZATION TO THE CONTROLL COMPANY 23-6000-755  OFFICE OF REGIONAL COMPANY 23-6000	And the state of t	Income to withheld & .				Mar subj	ili 10 1 . 1. Ĉ. 1	3	4
PEW LINTER COMPANY 23-6000: 765  OFFIC OF REGIONAL COMPANY 23-6000: 765  OFFIC OFFIC OFFIC OF REGIONAL COMPANY 23-6000: 765  OFFIC OFF					•		total on		
PERM LIBITIAL COMPANY 23-6000: 765  OFFICE OF REGIONAL COMPRESSION AND CONTROL OF THE STATE OF THE PROPERTY ST		713-	-1 4-4349	660658		620	539		3
PERM CENTRAL COMPANY 23-6000: 745  OFFICE OF RESIDENA COMPROTER  ROOM 90 MICHEGAY CENTRAL TERBIN'S 910C  DETROIL MICHEGAY CENTRAL TERBIN'S 910C  DETROIL MICHEGAY CENTRAL TERBIN'S 910C  DETROIL MICHEGAY CENTRAL TERBIN'S 910C  TOPS or print EMPLOYEE'S development number of and olders thousand the print the basel to get a control to get a control to the basel to get a control t									
PERM CENTRAL COMPANY 23-6000: 745  OFFICE OF REGIONAL COMPANY 23-6000: 745  OFFICE OFFICE OFFICE OF REGIONAL COMPANY 23-6000: 745  OFFICE O		·						-	
PEW CENTRAL COMPANY 23-6000: 765  OFFICI GF. REGIONAL COMPENDITE  WAGE AND TAX STATEMENT 1968  Copy C - For employee's receils  TOWN FOR MICHIGAN EDITED TOWN AND TOWN TOWN TOWN TOWN TOWN TOWN TOWN TOWN	Prior EMPLOYCE'S Social Socurity Occ.	ount to, nome and odders show	t-plesse	scopy and employe	r's capy			"	
PERN LENTRAL COMPANY 23-6000: 765  OFFICE-OF-REGIONAL COMPROSITE  ROOM 907 MICHIGAE CEREBRA 18216  OTROS, MICHIGAE CEREBRA 18216  Copy C-For employee's records  Copy C-For employee's rec	7.					olf Evanction			
PEW ZENTRAL COMPANY 23-6000: 745  OFFICE GG REGIONAL COMPROTES  ROON 907 MICHIGAN 6216  From in pure EMPLOYEE'S chamilitating number, none and odders flow.  Capy C—for employee's roterids  C		TORE PIECES APP	'. I.I.S. N	IO. 842					1 3
PROOF BY MOHER LEBRANCE TERRING SIDE  OFFROM, MICHGAN 48216  TO PHYSICAL PROOF THE PROOF TRANSPORTED COMPANIES COMPA									
PROOF BY MOHER LEBRANCE TERRING SIDE  OFFROM, MICHGAN 48216  TO PHYSICAL PROOF THE PROOF TRANSPORTED COMPANIES COMPA				• •	•	. , .		4. G.	
PROOF BY MOHER LEBRANCE TERRING SIDE  OFFROM, MICHGAN 48216  TO PHYSICAL PROOF THE PROOF TRANSPORTED COMPANIES COMPA			•						
PROOF BY MOHER LEBRANCE TERRING SIDE  OFFROM, MICHGAN 48216  TO PHYSICAL PROOF THE PROOF TRANSPORTED COMPANIES COMPA					•	-			<b>3</b>
Pipe or part EMPLOYE'S notice and address including (AP seeds) above.    Comparison of the part of the	-KOOM MAY MICHICAN CENTON	110	WAGE AN	AT2 XAT DN	TEMEI	VT 10	ìga -		
The or part EMPLOYE'S notice and address line hang (AF and s) above.  NGNE NONE 2  SOLID SECURITY number 2  SALE AND EACH SECURITY NUMBER 3  SALE AND EACH SECURITY N	NOW YOU MICHIGAN CENTRAL DETROIT, MICHIGAN 48216  TOO OF PURE EMPLOYENS COMMISSIONERS  TOO OF PURE EMPLOYENS COMMISSIONERS	IER TERMINA DIDG. Inumber, none and oddress above.		Copy C-F		li,	)68 		
E J RENK( 13415 HAPLAN AVE LAKENCO 7 CHIC  TO DISTRIBUTE STATE and address including (AF 1881) where  The same and posterior and address including (AF 1881) where  The same analysis and the same and address including (AF 1881) where  The same analysis and the same and address including (AF 1881) where  The same analysis and the same and the same are for the same are for the same and the same and the same are for the same and the same and the same are for the same and the same and the same are for the same and	MICHIGAN CENTRAL DETROIT, MICHIGAN 48216 Type or print EMPLOYER'S Identification PROPER PROPERTY THE PROPERTY	IRMIN'S DIG.	1) C a lend (Data	Copy C-F	er empl	cyee's re			
E J BENK( 13415 HAPLAN AVE LAKELCO 7 CHIC  THOUGHT SEA TO.  THOUGHT SEA TO	PODM WW MICHEAR (ENTRAL DETROIT, MICHEAN 48216  Trop or print EMPLOYER'S Identification Property Michean Williams (E1, 26)  E4, 26	IRMIN'S DIG.	to whomb	Copy C FORMW-2	FAND	cyee's re			
E J RENKC 13415 HABIAN AVE LAKENCO 7 CHIC  THE CONTROL OF THE CONT	AUDITADIT, MICHIGAN 48216  TODO OF PIPE EMPLOYER'S OF MICHIGANICADION  MICHIGAN ROOM IN MICHIGANICADION  11, 26  Type of pipe EMPLOYER'S  Type of pipe EMPLOYER'S	number, none and address above.  **NAME OF TRANSPORT OF T	PICA BANGO	Capy C-F PORM W-2-40 F TOWN TOWN PICA WACES PAID TO MADE NO NO MADE NO NE	Filing 1	GROSS WAG	13PC# STATE BDW PLOTEN PE		
LAKE LCCO 7 CH1C  In District band on the population of the popula	RUDA WW MICHIGAN (ENTRAL DETROIT, MICHIGAN 48216  TODO OF PIPE EMPLOYER'S INVESTIGATION PROPERTY OF THE PROPER	number, none and address above.  **NAME OF TRANSPORT OF T	FIG. 1 SANCES	Copy C—F PORAWS—109 Promoted Property P	or empl	CAOIS WAC OF DUTTING A	SPICE STATE  OD- PICERA PA	A RESIDENCE	
The or prof EMPLOYE'S none and address including (AF saids) where  The said sample of the said of the	FOOD YOU MICHIGAR (ENTRAL  STORY OF THE REPROPERS IN THE PROPERTY OF THE PROPE	TERMINA 910G.  number none and address above.  Names trace  Other Complete signs  713 14 16 34 5	PAGE OF EST	Copy C—F PORAWS—109 Promoted Property P	or empl	CAOIS WAC OF DUTTING A	SPICE STATE  OD- PICERA PA	A PROPERTY OF THE PARTY OF THE	
SPA OF DEST EMPLOYEE'S none and address [including 2/F code] above.  The last including an entirely formed by	AUGH YOU MICHIGAR (EMTRAL DETROIT, MICHIGAN 48216  Type or pure RAMPLOYER'S identification with the company of the Michigan Michigan With the company of the Michigan With the company of the Michigan With the company of the Michigan Type or pure RAMPLOYEE'S  Type or pure RAMPLOYEE'S  Type or pure RAMPLOYEE'S  Type or pure RAMPLOYEE'S  Type of pure RAMPLOY	number name and odders those.  Number name and odders those.  Number name of the content input  Property of the content inpu	FECUNDANT SCE PAY  FECUNDANT SCE PAY  FECUNDANT SCE PAY	Copy C—F PORMS 2-M9 Promo	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF		
South In Defending to the state that the Life of the state of the Life of the South Inc.	POPEN YOU MICHIGAN (ENTRAL DETROIT, MICHIGAN 48216  FIDE OF PUMP EMPROPHENS identification receives RECOUNTY in Management in the pump in the Propenting in	number name and address thore.  NUMBER NAME OF THE CONTROL OF THE	PICTUDAN SCENARIOS  PER WINDOWS SCENARIOS  PROMISE SEE PAY  PER SEE SEE SEE SEE SEE SEE SEE SEE SEE S	Copy C—F PORMS 2-M9 Promo	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF	**************************************	
	POPE OF PIPE EMPROYEES A STATE OF THE PIPE OF PIPE EMPROYEES A STATE OF THE PIPE OF THE PI	number name and address thore.  NUMBER NAME OF THE CONTROL OF THE	FIGURE BEGGET  FIG. 4 SHORTON   Copy C-F PORMENT	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF			
	Pype on puri EMPROYETS  Popo or puri EMPROYETS  EL J BENKI  13415 HAPLOF	number name and address thore.  NUMBER NAME OF THE CONTROL OF THE	FIGURE BEGGET  FIG. 4 SHORTON   Copy C-F PORMENT	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF			
	Pype on puri EMPROYETS  Popo or puri EMPROYETS  EL J BENKI  13415 HAPLOF	number name and address thore.  NUMBER NAME OF THE CONTROL OF THE	FIGURE BEGGET  FIG. 4 SHORTON   Copy C-F PORMENT	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF			
	POPE OF PIPE EMPROYEES A STATE OF THE PIPE OF PIPE EMPROYEES A STATE OF THE PIPE OF THE PI	number name and address thore.  NUMBER NAME OF THE CONTROL OF THE	FIGURE BEGGET  FIG. 4 SHORTON   Copy C-F PORMENT	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF			
	POPE OF PIPE EMPROYEES A STATE OF THE PIPE OF PIPE EMPROYEES A STATE OF THE PIPE OF THE PI	number name and address thore.  NUMBER NAME OF THE CONTROL OF THE	FIGURE BEGGET  FIG. 4 SHORTON   Copy C-F PORMENT	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF			
	POPE OF PIPE EMPROYEES A STATE OF THE PIPE OF PIPE EMPROYEES A STATE OF THE PIPE OF THE PI	number name and address thore.  NUMBER NAME OF THE CONTROL OF THE	FIGURE BEGGET  FIG. 4 SHORTON   Copy C-F PORMENT	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF			
	POPE OF PIPE EMPROYEES A STATE OF THE PIPE OF PIPE EMPROYEES A STATE OF THE PIPE OF THE PI	number name and address thore.  NUMBER NAME OF THE CONTROL OF THE	FIGURE BEGGET  FIG. 4 SHORTON   Copy C-F PORMENT	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF			
	FOR YOU MICHIGAR (EMTRAL  STORY MICHIGAN 48216  FOR OF PIPE EMPLOYEE'S institution in the pipe of pipe employee's institution in the pipe of pipe employee's institution in the pipe of pipe of pipe employee's institution in the pipe of pipe of pipe employee's institution in the pipe of pipe employee's institution in the pipe of pipe employee's institution of the pipe employ	number name and address thore.  NUMBER NAME OF THE CONTROL OF THE	FIGURE BEGGET  FIG. 4 SHORTON   Copy C-F PORMENT	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF			
	FOR YOU MICHIGAR (EMTRAL  STORY MICHIGAN 48216  FOR OF PIPE EMPLOYEE'S institution in the pipe of pipe employee's institution in the pipe of pipe employee's institution in the pipe of pipe of pipe employee's institution in the pipe of pipe of pipe employee's institution in the pipe of pipe employee's institution in the pipe of pipe employee's institution of the pipe employ	number name and address thore.  NUMBER NAME OF THE CONTROL OF THE	FIGURE BEGGET  FIG. 4 SHORTON   Copy C-F PORMENT	or empl	CAOIS WAC OF DUTTING A	1970 STATE OF THE PROPERTY OF			

	. 13 Marin Jind uras apria Pa 1910a			WAGE AND TA	X STATEMENT 19
	ER AUNK				employee's records.
INCOME TA	N INFORMAL	ON		FEDERAL INCOM	E TAX INFORMATION
\$324.40	\$324.40 114 5.5		SR	\$ 579, Sh	
deductional panel in 1948 deductional	140	m = Albana, a way		P - D X 15 - D 16 rifered frequency facilities rids, if any	\$3157.20 Alet al mas (repre best
		1 m at 1 a		1~~~~	No subject to 5 o C a 5
E J BENKO 13415 HAPLAN LAKEMUOD 7	AV OHI	715-14-	-4249	660a5 g	620 539
lippe or Prior EnditOrity's Savad Society, account	يو لومو ومعود رجم بد	fdrank alegea	Employa shropery	o'b was and amplicable sup	
ALTERNATIVE I	FDR* 17-2	10? APP. 1	.r.s.	10. 942	payof frontens or "set pay" sub
PENN CENTRAL TRANSPORTATIO	ON COMPANY. 73 ( ET, PHILADELPHI	DEBTOR 5000765 A. PA. 19104	, WAGE	AND TAX STAT	ILMENT 1970
PENN CENTRAL TRANSPORTATIO	ON COMPANY, 73 ( ET, PHI ADELPHI) sumber, name, or	DEBFOR SOMPAS A, PA, 1910a d sediess above.	, WAGE	AND TAX STAT	ILMENT 1970
PENNE CENTRAL TRANSPORTATION BOOM 815, 15 NORTH 32nd SWEI Ippe on pint EMPLOTES I denthicution FEDERAL INCOME	ON COMPANY, 73 ( ET, PHI ADELPHI) sumber, name, or	DEBFOR SOMPAS A, PA, 1910a d sediess above.	, WAGE	AND TAX STAT	ILMENT 1970
PENNE CENTRAL TRANSPORTATION  BOOM 813, 15 NOBINE 32nd SWEI  SPORTATION FROM STATE  FROM STATE STATE  Fadural Inserse lies Woogn date  withheld	OM COMPANY, 73 ( ET, PHI ADELPHI) author, name, or EAR INFORMATIC	DEBFOR 5000765 A. PA. 1910a id address above. I	, WAGE	AND TAX STAT	ILMENT 1970
PENNE CENTRAL TRANSPORTATION OF THE PROPERTY O	ON COMPANY, 23-1 ET, PHILADELPHII. ELEMENT, NAME, OF TAX INFORMATIC MARKET TO A STATE AND	DEBFOR 5000765 A. PA. 1910a id address above. I	, WAGE , Copy SOCIAL S	AND TAX STAT	IMENT 1970
PENNS CENTRAL TRANSPORTATION  BOOM BIS, 15 NORTH STAND SWEL  FRUENCH SHE MAN TO NORTH STAND  FRUENCH SHE MAN TO NORTH SHE  FRUENCH SHE MAN TO NORTH SHE  FOR THE  FOR THE SHE  FOR THE  FOR THE SHE  FOR THE  FOR THE SHE  FOR THE	ON COMPANY, 721-16. EF, Pritt Active to the company of the company	DEBTOR SOURCES A PA. 191DA d address above. 1 M Librar companie gland paid in 1670	SOCIAL S	AND TAX STAT  C-For compleyer's re LUPIT INFORMATION  Admits to P. L. C. A.)  Sing reported by engineer	11 1970
PENNE CENTRAL TRANSPORTATIO  ROOM BIS. 15 MORINE 27and SWEI  Type us pint LMPLOYE'S the hely close  FIELERAL MICKOME  Fulled insered her  without  PC 7 " " " " "  Type us paint EMPLOYE'S united very visy  For any paint EMPLOYE'S united very visy  For any paint EMPLOYE'S united very visy  For any paint EMPLOYE'S united very visy	ON COMPANY, 27-EE, PHILADELPHI number, name, or LAX UNFORMATIC Maries or with	DEBTOR MODOZAS A. PA. 1910a d sobies show	SOCIAL S	AND TAX STATE  (C-For employee's re-  (LURIT INFORMATION  Amount to P. L. C. A.)  (Single reported by employees as take page publicate  and the many amounts of persons.	11 1970

		ISFORTATION COMPANY, 23 32nd STREET, PHILADELPHIA		WAGE AND TAX	yee's records
	FEGE	PAL INCOME TAX INFORMAT	ION	SOCIAL SECURITY INFORMA	STATE & HOCAP
<u> </u>	tederal income ton widtheld	Wages pried subject to with- holding in 1971 1	Other compens- tion poid in 1971?	man white a m t t C A	123.32
. , .	Type or print EMPLOYEE'S social security number		Mat subject to F. F. C. A.I.  I highligs hips reported by employee. Amount is before po		
,		S name and address finituding	CIP code) obuse.	Uncullected Employee fax on I	· · · · · · · · · · · · · · · · · · ·
	FORM W-2 - U. 5. 7-	comp Department, Internet Rever	uus Servine		
	PENIN CENTRAL TRAN	SPORTATION COMPANY, 23- 32-6 STREET, PHILADELPHI	6000765	WAGE AND YA	X STATEMENT 1971
	INC	OME TAX INFORMATION	į.	FEDERAL INCOM	AE TAX INFORMATION
-		131.37	\$79.32	5590.78	15,273.29
	Total Wages (before p deductions) paid in 19	on to eco	withheld, if pay	federal locaine fan with hold, it any	Total wages- paid in 1971 g (Not subject to F. I. C. A.)
	ps: Hane and Address z	Αν	Sector Security 71 × 1 × 6 28 × 1 × 6 × 1 ± 7		Pay half taxonon 3 329 G47
				imployee's copy and employer's e	ору
	ROOM 215, 15 NO	TRANSPORTATION COMPA	73-6000765	WAGE AND TAX STATEME logs ( - for employee's reco	ords
11.	412.65	3003.48	One (sepended) Fod a 1973	SOCIAL SCIENTS AND	MCORECTS FABOUR TALON FAS
	J BENKO	→ 713-14-43 320 059 66		NO CITY	CH 155777  las witheld 1559
·	AKÉWOOD 7	0H19 441	C7 MOTORINA CHIC	D (4)	CPOSS TARRAM WAGE 30-33-48 TAR WITHHELD

PENN CENTRAL TRANSPORTATION COMPANY, DEBIUM 23-00007-05 Topy C for amplayer's retards

Wage and Lax Statement

Copy C for amplayer's retards ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104 FEDERAL DECOME TAX DECEMBION
Federal return 7 Wept to our
terminate 1 1913-29 STATE OR CITY INCOME FAR INFORMATION B Name of State as City 6 las withheld 9.64 7 | Insubbe voge 1473.24 713-14-4345 J20 059 1) Name of State or City P for witherd C & BENKU 13415 HARLAN AV 060658 10 | tamble ----6HIU 44107 (or or pray men the Eurhaidh úil pay halland is bas 3

PCC03243

ROOM 215, 15 NOR	RANSPORTATION COM	23-6000765 ELPHIA, PA. 19104	WEGI AND THE STAT	
412.65	**************************************	Oner Compression of Park in 1973	Phot School for I CA.)	FIRST BE EXPENDED FOR EXPENDENT OF EMPLOYER COMPANY CO
E J CLEAR D  13415 PARE AR AR LAKE FIRST 7		244 60655		

1 to be delle	ELAND UNION TERMINALS CO. NO. 34 6  Office of District Auditor of Exposor times of Exposor times of Exposor times.	WITHHOLDING TAX STATEM	
<b>一种,对于</b>	PLOYER'S Identification number, name and address a	The bank of the Land of the La	
	SOCIAL SECURITY INFORMATION	INCOME JAX INFORMATION	ويتنجب وبالجواجب
PAYEOI ABST. N		federal themper Total Wegare Total Wegare poid in 1944	0 60
ins and	NONE S NONE		The Z
(9) (69) 7	K B DAY	249.71 72.71.71.71.71.71	San Car
	9620 FRANKLIN BLVD 4	MOTICES IF your impair on subject by Books	locarby town, but one as
157 4 7	Anen Luubettu Bran .	00-10-424 1 Thispiry will of the fine and	いななっとフ

THE FERRAL INCOME TAX INFORMATION INCOME TAX	Room 815	SPORTATION COMPANY, DEBTOR , 15 North 32nd Street Jelphia, Po. 19104	WAGI	C-For emplo	STATEMENT 19	, w
Total Wages Belong pyroll deduction) poid in 1970  Type None and Address  R. B. BAY  PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-000705  CLEVELAND  Total Wages Belong Pyroll deduction or July part of the Penn CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-000705  Total Wages Belong Pyroll deduction or July part of the Penn CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-000705  ROOM 215, 15 NORTH 32rd STREET, PHILADELPHIA, PA. 19104  LEVELAND CITY  Total Wages Belong Pyroll deduction or July part of the Penn CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-000705  Total Wages Ball at 1971  Total Wages Belong Pyroll deduction or July part of the Penn CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-000705  Total Wages Ball at 1971  Total Wages Belong Pyroll deduction or July part of the Penn CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-000705  Total Wages Ball at 1971  Total Wages Ball at	CLEVELAND CLIV		FEDE	RAT INCOME	TAX INFORMATION	
Total Wages (before perpet) deduction) paid in 1970   Income tax withhold, if any   Federal terone loa with paid wages a paid in   Pathology and total paid in 1970   Income tax withhold, if any   Federal terone loa with paid wages a paid in   Pathology and total paid in 1970   Income tax withhold, if any   Federal terone loa with paid   Pathology and total pathol	INCOME TAX	INFORMATION	\ . · · · · · · · · · · · · · · · · · ·		ear 941.5	2
Types Name and Address  K. G. BAY  CE EVELAND  Fenn Central Transportation Company, Debtor 23-600765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  CLEVELAND  Social Security account on Philadelphysis copy and employer's records  Federal INCOME TAX INFORMATION  Social Security account on Employee's records  Federal INCOME TAX INFORMATION  Social Security account on Employee's copy and employer's copy and employe	Total Wooes (before ppyroll		Federal Inco	me Tax with-	Total wages * paid in (Not subject to F. L.C.	1970
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  CLEVELAND  Total Wages before poyred deduction) point in 1971  Income tox withhold, if emy deduction) point in 1971  Typen None and Addma  A H DAY OGG DETEOLT A  CLEVELATED  PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR Social Security sections to with held, if any A GG 16.76.3  CAG 15.76.3  CAG 16.76.3  CAG		\$	ocial Security account no.	Employee no.	Reference	on .
Employee's copy and employer's copy compared.    PENN CENTERAL TRANSPORTATION COMPANY, DEBTOR 23-6000745   ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104   Use VELAND UITY   NICOME TAX INFORMATION	K 6 BAY			646338	329	42
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23 6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  CLEVELAND CITY  INCOME TAX INFORMATION  S5,001.75  Total Woger (before payroll) Income tox withheld, if eny deduction) poid in 1971  Typen Home and Address  A H BAY  OGOT DETERIT A  CLEVELATED  FENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23 6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  Fenn CENTRAL TRANSPORTATION COMPANY, DEBTOR 23 6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  Fenn CENTRAL TRANSPORTATION COMPANY, DEBTOR 25 6580-84  For Room 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  Fenn CENTRAL TRANSPORTATION COMPANY, DEBTOR 25 6580-84  For Room 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  Fenn CENTRAL TRANSPORTATION COMPANY, DEBTOR 26 AND TAX STATEMENT 1971  Copy C-For employee's records  Federal Income Tox with Income Tox with Income Tox with Income Tox with Security accounts to the Tox with Security Copy and Employer's topy and Employer's topy  Fenn CENTRAL TRANSPORTATION COMPANY, DEBTOR 27 Copy C-For employee's records  Federal Income Tox with Income Tox with Security Accounts to the Tox with Accounts to the Tox with Security Accounts to the Tox with	CL EVELAND	1963.83		and employer's co	, DY	
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 22-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  CEYELAND CITY  NCOME TAX INFORMATION  FEDERAL INCOME TAX INFORMATION  S5, 0G1. 75  1550-02  Federal Income Tax Information  Total Wages (before payroll deduction) poid in 1971  Gederal form poid in 1971  Total Wages (before payroll deduction) poid in 1971  Total Wages (before payroll deduction or "Mil pay" and Advance or "Mil pay" and Debtor (before payroll deduction or "Mil payroll payroll payroll payroll payroll deduction or "Mil payroll payro	to the second se					
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  Copy C-For employee's records  Copy C-For employee's records  Copy C-For employee's records  S1, 202-52  Federal Income Tax information  FEDERAL INCOME TAX Information  FEDERAL INCOME TAX Information  For Roll  Total Wages (before popyroll deduction) poid in 1971  Income tox withheld, if may held, if may he	•			* Bel	ore payroll deductions or "sick	pay ench
ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  Copy C-For employee's records  C14  C25  C25  C25  C25  C25  C26  C27  C27  C28  C28  C28  C29  C29  C29  C29  C29	1.25.					
ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  Cleveland Cliv  INCOME TAX INFORMATION  S5, 061, 75  Total Wages before payroll deduction) poid in 1971  Income tox withheld, if any held, if a						
ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  CLEVELAND CITY  INCOME TAX INFORMATION  S5, 0G1-75  Total Wages (before payroll deduction) poid in 1971  Income tox withheld, if any held, if a						0
ROOM 215, 15 NORTH 37nd STREET, PHILADELPHIA, PA. 19104  Copy C-For employee's records  CLEVELAND CITY  INCOME TAX INFORMATION  S5, 0G1-75  S59, 0G1-75  Total Wages before payroli  Income tax withheld, if any Income tax withheld in 1971 Income tax withhe	PENN CENTRAL TRANSPORTATION	COMPANY, DEBTOR	WAGEA	ND TAX STA	TEMENT 1971	Ö
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHRADELPHIA, PA. 19104  PROMETRIAL TRANSPORTATION COMPANY, DEBTOR 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHRADELPHIA, PA. 19104  FINE Words and the words are with the words are words are words are with the words are words are words are words are words are words	ROOM 215, 15 NORTH 32nd STREET.					. •
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 191	· · · · · · · · · · · · · · · · · · ·		Copy C-1	ror employee:	s records	_ 0
Total Wages (before payroll deductions) poid in 1971  Types Name and Accord  Types Name and		ORMATION	FEDERAL	INCOME TAX	INFORMATION	
Type: Name and Activity  A BAY  A GOLOGICA SCALAR SCURITY ACCOUNTES  A H BAY  A GOLOGICA SCALAR CURITY MANAGES  A H BAY  A GOLOGICA SCALAR CURITY MANAGES  B DAY  A GOLOGICA  A GOLOGICA  Berployee's copy and employer's copy  CHALLEYELARIO  CHALLEY	Total Wages (before payroll	•	Federal Income To		Total wages + paid in 1971	0
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-6000765 ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  TEMBRIT INCOMPTATION COMPANY, DEBTOR 23-6000765 ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  TEMBRIT INCOMPTATION COMPANY, DEBTOR 23-6000765 ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  TEMBRIT INCOMPTATION COMPANY, DEBTOR 23-6000765 ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  TREGET INCOMPTATION COMPANY, DEBTOR 23-6000765 ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  TREGET INCOMPTATION COMPANY, DEBTOR 23-6000765 ROOM 315, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  TREGET INCOMPTATION COMPANY, DEBTOR 23-6000765 ROOM 315, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  TREGET INCOMPTATION COMPANY, DEBTOR 23-6000765 ROOM 315, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  TREGET INCOMPTATION COMPANY, DEBTOR 23-6000765 ROOM 315, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  TREGET INCOMPTATION COMPANY, DEBTOR 23-6000765 ROOM 315, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  TREGET INCOMPTATION COMPANY, DEBTOR 34000755  TREGET INCOMPTATION COMPANY, DEBTOR 35000755  TREGET INCOMPTATION COMPANY, DEBTOR 36000755  TREGET INCOMPTATION COMPANY, DEBTOR 37-000755  TREGET INCO		Social S	ecurity account no. Empl			
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  FEBRAL INCOME TAL INFORMATION  Worgs: Food Subject 10  Wordsholding in 1972  Tedent income Tax Wordshold  Wordsholding in 1972  NAME OF STATE OR CITY  1 A 31 - 35  6 580 - 84  B DAY  607 DE TROIT A  Employee's copy and employer's topy  Compared to making in normal hours in this point Advance or "sick page" asked  ### Belove poyroll deductions or "sick page" asked  #### A 400-10-6263  320 059 646138  Employee's copy and employer's topy  Compared to making in this point Advance or "sick page" asked  #### A 400-10-6263  320 059 646138  Employee's copy and employer's topy  Compared to making in this point Advance or "sick page" asked  #### A 400-10-6263  320 059 646138  Employee's copy and employer's topy  Compared to making in this point Advance or "sick page" asked    Making to point A to making in this point Advance or "sick page" asked    Making to point A to making in this point		469	51.06263 6	4613fi	320: 647	
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  REDERAL INCOME TAX INFORMATION  Wogs? Tool Subject To Other Compensations?  REDERAL INCOME TAX INFORMATION  TESTIGNED TO SECURITY FORMATION  NOW Subject To FILC A.1  WOG TOOLS TAXABLE WAS SOCIAL SECURITY FORMATION  NOW OF TROIT A. 2005  B DAY  GROSS TAXABLE WAS SOCIAL SECURITY HUMBER  B DAY  GROSS TAXABLE WAS SOCIAL SECURITY HUMBER  GR		GHIC 44	real			
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  REDERAL INCOME TAX INIGINALATION  Wogst 7 and 5 shipts 10  TRANSPORTATION COMPANY, DEBTOR 23-6000765  WAGE AND TAX STATEMENT 1972  (apy ( - For employee's records)  REDERAL INCOME TAX INIGINALATION  Wogst 7 and 5 shipts 10  Other Compensation 2  Paid in 1972  Other Compensation 2  Paid in 1972  Other Compensation 2  REDERAL INCOME TAX INIGINALATION  Wogst 7 and 5 shipts 10  I A 31 - 35  6580 - 84  NAME OF STATE OR CITY  DYFE OR FRINTS EMPLOYEE'S  OCICIAL SECURITY HUMBER  B DAY  GROSS INAMBEE WAR  67 DE TROIT A  CROSS INAMBEE WAR  68 DAY  60 DE TROIT A  CROSS INAMBEE WAR  68 DAY			E-love's convend or	nelover's snov		$\neg$
PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR  23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  REDERAL INCOME TAX INFORMATION  Weight Food Subject to Other Compression of Pend in 1972  14 31 - 35  6580 - 84  NAME OF STATE OR CITY  OTHER COR FIRMS EMPLOYEES  SOCIAL SECURITY NUMBER  400-10-6263  320 059 646138  ROAD  GROSS IAXABLE WAS  SOCIAL SECURITY NUMBER  GROSS IAXABLE WAS  6580 - 84  CROSS IAXABLE WAS  6580 - 84						
PENN CENTRAL TRANSPORTATION 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  FEDERAL INCOME TAX INFORMATION  Once Compensational (Not Subject to F.I.C.A.1)  FEDERAL INCOME TAX INFORMATION  Once Compensational (Not Subject to F.I.C.A.1)  FEDERAL INCOME TAX INFORMATION  ONCE OF TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INFORMATION  ON THE OR TRINIT PRUMBER				*Belore poy	roll deductions or "sick pay" ax	clusion
PENN CENTRAL TRANSPORTATION 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  FEDERAL INCOME TAX INFORMATION  Once Compensational (Not Subject to F.I.C.A.1)  FEDERAL INCOME TAX INFORMATION  Once Compensational (Not Subject to F.I.C.A.1)  FEDERAL INCOME TAX INFORMATION  ONCE OF TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON TO STATE OR CITY  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INCOME TAX INFORMATION  ON THE OR TRINIT PRUMBER  FEDERAL INFORMATION  ON THE OR TRINIT PRUMBER			•	•	. •	
PENN CENTRAL TRANSPORTATION 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  FEDERAL INCOME TAX INTORNATION  FEDERAL INCOME TAX INTORNATION  Transportation 1972  Other Compressioners (Not Subject to F.E.C.A.)  11 31 - 35  6580 - 84  NAME OF STATE OR CITY  OFFICIAL SECURITY PRUMBER  B DAY  607 DE TROIT A  FEDERAL INCOME TAX INTORNATION  OTHER COMPRESSIONERS  OTHER CONTROL INTO CONTROL I						
PENN CENTRAL TRANSPORTATION 23-6000765  ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104  FEDERAL INCOME TAX INFORMATION  VOORTH TO A SUBJECT TO CONTROL TO CO					nem or just 180y dufferorin	
ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104 (upy ( - for employee's records)    Fideral Income Tax Inflormation   Social Ricurity Inflormation   Uncottected fairforte Tax on the State of City   Choice State of City   Other Compression   Uncottected fairforte Tax on the State of City   Other Compression   Other Co	PENN CENTRAL TRANSPORTATION	COMPANY, DEBTOR	I AN PAR TO SEE TAY CTA	TERMENT 1972	per septe to crist	
REDERAL INCOME 1AT INIGORATION   SOCIAL SQUART PRODUCTION		13.0000,02	(apy ( - for employee's	records		
11 31 - 35   6580 - 84	ROOM 215, 15 NORTH 32Rd STREET,	ANTION	SOCIAL SECURITY INFORMATION	UNCOLL	ECTED EMPLOYEE TAX ON TIPS	
### OR FRINT EMPLOYEES  OCIAL SECURITY PRIMER?  B DAY  607 DETROIT A  FOR CROSS TAXABLE WA  GROSS TAXA	Federal Income Ton Wishleld Wighlanding in	ort To Other Compensation <sup>2</sup> 972 Paid in 1972	(Not Subject to F.E.C. A.)			
### OR PRINT EMPLOYEES  ### OR PRINT EMPLOYEES  #### OR PRINT EMPLOYEES  ##################################		4	YE OR CITY	1		
B DAY	THE OR PRINT EMPLOYEE'S		DE OR CIT		<u> </u>	4
B DAY 607 DETROIT A GROSS TAMBLE WA		Till Carco				5
607 DETROIT A CONSTRUMENT					** : • :	4
	607 DETROIT A				V BIBAKAT ZZORO	MAGE
LEVELAND DHID 44102 NAME OF STATE OF CITY OH 5546.0		44102 NAME OF ST	YE OF CITA			

PENN CENTRAL TRANSPORTATION COMPANY, DEB 23-600 ROOM 215, 15 NORTH 32nd ST , PHILADELPHIA, F	765 identifying number,	ניסוו
FEDERAL INCOME TAX INFORMATION	STATE OR CITY INCOME TAX INFORMATION	
1 Federal income two withheld 2 Weges, his and other temperation UTU 57 3856014	8 Name of State or City Util U	6 Tox with
EMPLOYEE'S social security number D 400-10-626		7   Taxoble w
320 055 N 8 DAY 646158 8607 DETRUIT A	1) Name of State or City	9 Tax with
CLEVELAND OHIO 4410.	<b></b>	10 Taxable •
	Cost of group term life Reference included in bes 2 reimbursement if applicable	Excludable sick p- included in box
	If this is a corrected form, put on "X" in the upper le	oft corner.
Type as print EMPLOYEE'S name, address and 219 rade above.	Form W-2 Department of the Treasury-Internal Re	

PENN CENTRAL TRANSPORTA	23-6000	65 Hotenhying number, Conv C for employee's records	1974
FEDERAL INCOME TO		STATE OR CITY INCOME TAX INFORMATION	
Fadero) income tox withheld	2 Woges, tips and other companions	B Name of State or City  OHIG	Tox withheld
485.19	3064-8h	7	Tosoble wage
EMPLOYEE'S social security number D	400-10-62E		3064.86
28 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	320 414	11 Name of State at City 9	Tax withhold
BOOT DETROIT A	65138	10	Totable wage
LLEVELAND	OnId 4410	Cost of group term file Relacation included in box 7 immunes included in box 2 immunes included in box 2	
	Array Company	If this is a corrected form, put an "X" in the upper left corner	
		Form W-2 Department of the Treasury-Internal Revenue S	arvito

SPENDITURES ROOM SOT METHICAN CENTRAL JERNIWA BLO METHICAN CENTRAL JERNIWA BLO METHICAN CENTRAL JERNIWA BLO METHICAN CONTRAL SECTION OF THE PROPERTY OF THE PR	Copy Copy of application of the copy of th
PRODUCTOR AND THE PRODUCT TO POST COMPONENTS OF THE POST COMPONENTS OF THE POST COMP	DOWN LICE A SHOOT TO A
N P. DORAN 2532 DETABLE AVE CLEVELAND 13 OH 10	Christ Whitehalt Christ Whitehalt Christ Christ Christ Whitehalt Christ Chris
Community of the Commun	
THE CIEVELAND UNION SERMINALS CO. NO. 3.4 #0.50 F.2.2 Other Princip Replies of Parameters Some 3th Michigan Committee Bidg. BETAGIT, MICHIGAN 40210	WITHHOLDING TAX STATEMENT 1964
Social Sculpt/Problem purples and address others of Social Sculpt/Problemanics  Social	Inches   Inc
2532 DETROIT AVE 280-12	-95 65 MOREL M. Journal of the Company of the Compa
CLEVELAND 13 ONTO	phone.  Every this copy as port of your tear records.  Fore popular deductions or "sick pay" exchision.  App. 183, 477-44
ME. NEW YORK CENTRAL BALLROAD COMPANY, NO. 1 3'.4 0 0 Office of Dipinic Acidese of 3 penditures: Seem 907, Michigan Central Luminal Bldg. DIEDIT, MICHIGAN 48216 Print IMPLOYEE 5 Identification number. Informs and address above.	WITHHOLDING TAX STATEMENT 1964  Federal loses Withheld from Wapps 1964  Copy C—For Employee's Records
FATFOLL FLC A simpleyer per of FLC A. Wogan Federal S. Best, MO. B	INCOME AN INFORMATION    Index   Woman     point in 1944
2532 DETABLY AVE 280-12-	THEO HE TAX THE CREATED THE SECOND THE SECON
Type or prime (MPLDYEL'S sector) recordly account non-tigenes and address of PDBM W-2 - u.s. im- programs (amount have been particularly account to the particular account to	Comp (this copy of part of prior the fraction).  2   Comp payed objects from an inch (comp and name happy 1,12 2 244
THE CLEVELAND UNION TERMINALS CO. NO. 24 6 00 07 7 Office of Denier Auditor of Experiments. 2007, 607, Palentinan Central Levisinis Disg. 28THOOT 16. MICHIGAN	WITHHOLDING TAX STATEMENT 1963
Zalist User a language	BKOW JAYINFORMATION  I bud Wegger  I bud Weg
2528) HE (BD) 7 AVE 280-)	COLUMN STATE OF THE STATE OF TH
ELEVIEND 13 DATO	

Active and the control of the contro	NONE NOVE 1
H.E. DORAN 1490 M. 25TH . ST. 205 CLEVELIND. OHIU. 1790 or print Ellipschitted name and address (including 20	ESCUENTS POT TO SPECIAL SPECIA
THE N.Y. C.R. N. SO. 13 6001 OFFICE OF GISTRICT AUDITOR EXPENDITURES MOON SOT WICHIGAN CENTRAD TERMINAL B JETROIT, MICHIGAN 45216 The productory of the control of the cont	CDG COPY COPY AND
Top or part and or part of the second	MONE SONE
EXPENDITURYS SPONGARD TO A PERMINAL BL DEFROIT, WICHTCAN 18216	the same and the same of the s
H L DORAN  2532 DETROIT - AVE  ELEVELAND 13 ONTO	Vindre Sante
THE CLEVELAND UNION TERMIN OFFICE OF DIST AUDITOR OF EXPENDITURES ROOM SOT WISEFECTOR CENTRAL TERMINAL SEFROTES BICHIGAN ADZIE THE PRESENTED SOLD FOR AUTOMOTOR	E 60 MILL OF PAGE AND LAX STATUMENT 1965
THE BANK STRIED	

VEW YORK CENTRAL RAILROAD COMPANY, NO.1 3 WITHHOLDING TAX STATEMENT Federal Taxes Withheld From Wages Copy C-For Employee's Records nt EMPLOYER'S identification SOCIAL SECURITY INFORMATION INCOME TAX INFORMATION f.i.C.A. sampley tox Withheld, if any AYROU Total F.I.C.A. Wages poid in 1963 Federal Intome Tax Withheld, if any Total Wagen# paid in 1963 IST. NO I NONE I 1914 H E DORAN 2520 DETROIT AVE 280-12-9565 CLEVELAND 13 OHIO

PERM CHICKA (CHICAN) 254000 76 BERGE DE REGIONAL COMPTROLLER TOGRA HA MICHIGAN CENTRAL TERMS MERCUT, MICHIGAN ADAIG	Sole lan	Copy C - For SHIPMENT	
PRODUCTOR ENGLISH Send of any prophylical interpretation of the control of the co	280 12 9565	NUNE NOME T	Control (Control (Con
HEE DOCKAN 14CO N. 297H S CLEVELANO_CH.I  Sydeon print DAMSQYEE'S incirie and add-83	1 204	SHE SEC FAN  LECTED OWN OFFE  LI CHIEF  LI CHI	
THE REAL TORK CHINAL DARROWS DE NAMED DE DEUTST AUSTON OF DE NAMED	minitials.	GE AND TAX STATEMENT	
per to pre carrol Fe 3 de mitrachen number de la carrol Fe 3 de mitrac	BANGO OTHE COMPLY OF THE COMPL	NONE NONE	
H E DORAN 1400 M 25TH S CLEVELAND OHI	oraw T 204	Civilian Control Contr	

7 4	ROOM 215, 15 NO	RANSPORTATION COMMONTH 32. STREET, PHILADI	<b>クス. ムののカフよち</b>	WAGF "ID TAX STATEM (opy if employee's rect	
	643.09	Wager Feet Sasjeer To Visibation in 1977	Other (universation? Paid in 1972	SOCIAL SECURITY INFORMATION (Not Subject to End A.)	UNCOLLECTED FAIRIOVEE TAX ON 11PS
	DE GASTONY  3205 d 7340 S	$\begin{array}{c c} \rightarrow & 272-03-5\\ 320&539&6 \end{array}$	768 CLEVE 25592	FAMO CLIA	GROSS TAXABLE W 5960.2 TAX WITHELD 17.8
	MA MA SE CLEALT AND	OHIO 44	102 NAME OF SI	ATE OF CIT	5670 ° C

PENN CENTRAL TRANSPORTATION COMPANY
23-6000765
ROOM B15, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104

## WAGE AND TAX STATEMENT 1969

Copy C-For employee's records

FEDE	RAL INCOME TAX INFORMATION	ON	SOCIAL SECURITY INFORMATION STATE & LOCAL
rederal income fox withheld	Wages poid subject to with- holding in 19891	Other compensa- tion paid in 19692	SOCIAL SECURITY INFORMATION SIATE & FOCAL TAXES WITHHELD  (Not subject to F. I. C. A.)
G A GENT	5 social security number	3-14-2356 660430	1 Includes tips reported by employee. Amount is before pay- roll deductions or sick pay exclusion.  2 Add this item to wages in figuring the amount to be reported as wages and saturies on your income tax return.
4718 SNO FARMA 34	GHIC	626 542	
ORM W-2 - U. S. T	S name and address (including Zi	P code) above.	Uncollected Employee Tox on Tips \$

PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-600C Room 815, 15 North 37nd-Street - Philodelphin, Pu. 19104		Copy B-To be filed with employee's tax return		
CLEVELAND CITY INCOME TAX INFORMATION		FEDERAL INCOME TAX INFORMATION		
5 575. 55	\$579	\$539.03 Federal Income Tax withheld, if any	55,526.47  Total wages o paid in 197 (Nor subject to F. I. C. A.)	
deductions) paid in 1970  Type: Name and Address	Social Security	account na Employee na	Poy Roll Reference Location	
C A GENTILE 4718 SYDN RD PARMA	71,33.4. 7816: A41.34	NOTICE 10 EMPLOYEES: File In Residents report Gross Wages earned in Toxing Jurisdiction. Employee's copy and employer's compared	ix return according to regulation.  Non-Residents report Total W	

PENN CENTRAL TRANSPORTATION COMPANY, DEBTOR 23-6000765 ROOM 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 19104 FEDERAL INCOME TAX INFORMATION		WAGE AND TAX STATEMENT 1971  Copy C-For employee's records		
		SOCIAL SECURITY INFORMATION	STATE & LOCAL	
Federal income tax withheld	Wages paid subject to with- holding in 1971?	Other compensa- tion poid in 1971 <sup>2</sup>		DIZHHTIM ZZKAT
\$479.99	19260.45		(Not subject to F. I. C. A.)	\$45.52
Type ar print EMPLOYEE'S social security number 715-14-2566		Includes lips reported by employee. Amount is before pay- roll deductions or sick pay exclusion.  2 Add this item to wages in figuring the amount to be reported.		
G A GERT 4718 SNO	= * * * * *	650430 320 047	os wages and salaries an your income rax r	
PAICIA	7910 4	4134		
Type or print EMPLOYEL'S name and address (including ZIP code) above.		Uncollected Employee Tax on Tips	\$	

Vy Ser	<del>2</del>	ANSPORTATION COMPA TH 32nd STREET, PHILADEI	23-600	0765		E AND TAX STATEMEN  B - To be filed with Emplo		- <del></del>
Istral Reven	February Ten Wilhald	Wages Poid Subject to Withhelding in 1972	Orher Cor Poid	ngensation <sup>2</sup> in 1972		ALT INFORMATION  HELT TO F.R.C.A.;	UNCOLLECTED EMPLOY	HE TAX ON TH
ment. In	TYPE OR PRINT EMPLOYEE'S SOCIAL SECURITY NUMBER	→ 713-14-2		i	FAFK CE	TY	0H	GROSS TAXA
Treasury Department	G 7 GENTILE	13.20 059 6	60430					TAX WITHHE
	4718 SNOW RD	7HID 44	134	NAME OF S	TASE OR CHT			GROSS TAVA
FORM W-2-U.S.	STATE & CITY OF	Nii, Y		- Type		/age and Tax	Statement	197
	NN CENTRAL TRANSPORTATION 215, 15 NORTH 32nd S	13.0000	-	EMPL identi nome	ilying number. , address ZIP code	Copy C for emplo	yee's records	ner
RC	IOM 215, 15 NORTH 3210 3	W INCOMATION			STATE C	OR CITY INCOME TAX IN		
	FEDERAL INCOME TA		A	Nome of 5	tate or City		61	Ton withhal
.  -	feduct income tos withhold	2 L ather compensation		<b>'</b> .	•			47.9.
.  -	tos withhold to 41 a 40	7416.57	THE	<b>'</b> .			7 7	toxoble wo 416.5
	MPLOYEE'S social recurity number	7416.57 713-14-2366 320 059	JHL	<b>'</b> .			7 7 7 9 1	laxable wa
() (+	MPIOTEE'S social security number D  A DENTILE  718 SINUS HD	7416.57 7416.57 713-14-2366 320 059 660430	) HL	<u>.</u>			0 1	taxable was 416.5  Fax within
() (+	MPLOYEE'S social security number D	7416.57 713-14-2366 320 059	JHI J	<u>.</u>	p rerm the Ind in box 2	Relacasion included reintpursement if ex ected farm, put an "X" in	0 10 10 in box 2 facts inch	taxable wa 416.5 Tax withhi

. ···	ROOM 815, 15 NOR	CIH 72nd STORET OLDIANS	23-600 PHI A D		*	HAUL MIN.	INA JIN	LIFFETT	1 4 8 B B
٠.	Type or print EMPLOYE	R'S identification number nome	: 111A, P	ddress nhaw	·• ·	Copy C-For e	mplovos's	acord.	1 / / U
	FED	ERAL INCOME TAX INFORMA	TION					ecords *	
	remain income fox	Wages pard subject to with		Other compen		SOCIAL SECURITY INF	ORMATION	SI.	ATE & LOCAL
. !	withheld	holding in 1970:	1 -	on paid in 19				1	2- Entire (n.)
	9 AZBY. 68	\$50,17.00							
	Type or print EMPLOYEE				-	(Not subject to F. 4	l. C-A.)	- 15-	\$30 <b>.</b> :
	F	s	71.	- Laste	<b>b</b>	I includes tips report	ed by employe	e. Amourit	below
		The second secon			roll	- reactions of sith box	exclusion.		
•	-6 克 (武 1789)	Perses Para		66291	54 01	2 Add this item to wa wages and salaries on t	ges in liguring	the entoons	te bo reported
·	STRONG	grunder Sville 36 erij		320 54	40	:	- meoine los	return.	9.
		(1993年) (1994年) (1997年)	6.7	1136	.		. <del>-</del>		E. S.
ı	Type or print EMPLOYER	· · ·		بعود	•		<u>;                                    </u>		
L	FORM W-2 - "	S nome and address fincluding	ZIP cod	e) above.	Unco	lected Employee Tox	on Tips		<del>- •</del> · · ·
٠٠.	v. 5. 1	reasury Department, Internal Re	venue Se	ervice					<del></del>
							<i>1.</i>		
								<del></del>	
	TOAL TO	NCDORY ATION COMM			مدد بالمحدد	فالمقاسف للمشتوس	ماك الأعلاقة أبد ودر	The state of the	de de la company de la com La company de la company d
	•	INSPORTATION COMPAN	23-6006	በፖለ5	;	WAGE AND	τατρ χατ	FMFNIT	1071
	JM 215, 15 NORT	H 32nd STREET, PHILADELPH	IIA, PA.	19104	:	Copy C-For er			8 # # B
2	Federal income tox	ERAL INCOME TAX INFORMA				SOCIAL SECURITY INF	ORMATION	,S1/	ES WITHELD
	, withheld	Wages poid subject to with holding in 1971:	1 -	Other compen on poid in 19	nso <sup>2</sup>			14/1	12 MITTHELD
	1		"	pon mily	"				
	\$325.18	\$6778,20				(Not subject in F. I	. C. A.)	1 .	544 . 14
	Type or prim EMPLOYEE	'S social security number			71			ــــــــــــــــــــــــــــــــــــــ	
;;	A C	7	;	5-51 05	roll	1 Includes tips reported deductions or sick pay	ru by employer	2. Amount is	before pay
	- GRAPER		2	. E 7014	1	? Add this item to wa	ges in hausing	the omount	to be reported
ų.	17091 5			62964 0 747		wages and salaries on	yeur income tax	return. 's.	
÷:,			44 ; 3		4			. "	
			* **						
	Type or prim EMPLOYEE	'S name and address fincluding	ZIP cod	le) above	Unco	ollected Employee Tox	on En		<u> </u>
- 6. - 1.	FORM W-2 - U. S. Fre	cosury Department, Internal Reve	nue Servi	ice		Imployee los	un, nps	· · · · <b>&gt;</b> _	
									1/2
			:				•		
	PENN CENTRAL TR	ANSPORTATION COMPAN				tolers to reard by coders in	and a polyte popular fried and another may experien a	in him water per tember in 162 bet 60	4140
	ROOM 215 15 NOP	TH 32nd STREET, PHILADELP	23-600 HIA. PA			YAGE AND FAX STATE opy ( - for employee's ri			
		AL INCOME TAT INFORMATION				SECURITY INFORMATION		IFCTED ENPLOY	TE TAX ON TOC
Foder	ret income Fox Withheld	Wages Poid Subject To Wishholding in 1971	Osher Co Poid	in 1977		Subject to F.I.C.A.)	- encor	takiti	
	138.79	4625.40			ĺ	•			
	139.17	700,00		T NAME OF ST	IATE OF CITY		<u> </u>		GROSS TAXABLE
	OR PRINT EMPLOYEE'S	→ 713-18-51¢	05		FLAND	CITY		Ωн	3567.6
	AL SECURIT NUMBER	320 059 66		1					TAN WITHHELD
				-					35.0
soci	NORRIS			1					
soci		•		1					
soci G F 176	NORRIS 191 SHUPMER RONGSVILLE 3	6 0HIO 641	35	NAME OF ST	YILD RO STATE				GROSS TAXABLE
soci G F 176	91 SHUPHER	6 OHIO 641	35	MAME OF ST	TATE OR CITY				4625.4
soci G F 176	91 SHUPHER	6 ОНІО 641	35	t .	TATE OR CITY	` .			

1 Contro burneer 4 Employer's State LCA number —	OMB No. 1545-0009  -3 Employer's Identification number — For employee's records This information is being furnished to the Internal Revenue Service States Statement of the Internal Revenue Service Service
SUBSALL/UTU PRODUCTIVELY SUCS SE HURTINGTON RACKS TRUSTORP 917 EUCLID AVERUE	Employee Market Page Hold Engl. September De Del Comp. Vols  8 Afficialed Type  6 Afficialed Type  6 Afficialed Type  6 Afficialed Type  7 Afficialed Type  8 Afficia
E Employee's name, address and 20 code	10 Words. Ups. other compensation 11 Social according to a withheld 12 Social according to a withheld 14 Social according to a withheld 15 Social according to a withheld 16 Soc
196-0 0203424006	19 Social security steps  14 Social security steps  16 Social security steps  17 Social security steps  18 Social security steps  19 Social security steps  10 Social security steps  10 Social security steps  10 Social security steps  10 Social security steps  11 Social security steps  12 Social security steps  13 Social security steps  14 Social security steps  15 Social security steps  16 Social security steps  16 Social security steps  17 Social security steps  18 Social security steps  19 Social security steps  10 Social security
C STEISLE LEXA LORGIN S CLEVELASS 46111	of State distance and the State States, Spr. on the states of State \$2.
Form W-2 Wage and Tax Statement 1988 3571500145 MP.	20 Local nations that 27 Local wayth of the 22 thins of housing

1 Control Number 4 Employer's State 033706	WAGE AND TAX ST	TATEMENT FORM W-2	RAILROAD F	ETIREMENT
Z Employer's Name. Address and Zip C CONSOLIDATED RAIL CORN ROOM 207, 15 N. 32ND STREET	PORATION	- Páš		HHELD 2,563,28 1,453.47
PHILA., PA 19104-2849	3 Employer's 1dentificati number 23-1989084		Cost of Group	Term Life Insurance of in Box 10
Employer's Social Security No. 288-22-4006	9 Federal Income Tox Hithheld 4,171.43	10 Happy, 11px, Other Comp 34,130,93	Lb Deferred Comp401K	Min Fringe Benefits Incl. in New 10
2 Employer's Name Address and 21p Co C STEIMLE	3200	Name of State or City OHIO	Tax Hithheld 1,108.31	Taxable Hage 34,130.93
12224 LORAIN A	760 629895 OH 44111	CLEVELAND CITY	1 == H3 thheld 682.63	70×4010 Haye 34,130.93
Camer Elivary	OU 44111	This information 1:	employee's	e IRS

£ 704	- Diditioual micome	<u>I ax Heturi</u>	<u>, 1988</u>	(3)	paye	
Label	For the year Jan Dec. 31, 1988, or other t			88, ending		19 OMB N
	B CB 288-22 4004		AR-RT-SOR		name }	Your social security
Use IRS label. Otherwise	CB 288-22-4006 CHRIST & BETTY		4-9977 S1	7 30		<u> </u>
please print or	H 12224 LORAIN A		EIMLE JR			Spouse's social sect
type.	CLEVELAND OH	VE .	6633	ຸ 028 <b>ຽ</b>		
	E CONTRACTOR ON		4411	1		For Privacy Act and Pa Reduction Act Natice.
Presidential	Do you want \$1 to go to this fur	nd?		Yes	<i>99998</i>	No Note: Checkin
Election Camp	olgn If joint return, does your spous	se want \$1 to	go to this fund?.	Yes		No reduce
Filing Status	1 Single					700   700
ining Status	married hing joint return	n (even if only o	ne had income)			
Check only	. Married filing separate reto	ura. Enter spouse'	a social security no. a	above and full name	e here.	
one box.	. I twon or nonzendia (Miti	n qualitying pers	son). <i>(</i> See nace 7 o	of instructions.) H	f the qualifyin	g person is your c
	The state of the s	IND STRUCT HELE	<u>.</u>			
	5 Qualifying widow(er) with 6a Yourself If someone (such a	as your page )	to (year spouse die	<u>0 ► 19 ). (S</u>	ee page 7 of I	nstructions.)
Exemptions	DOLOG SOLE LO CHE	ייביו זונט אסט שנוו וויבי	ほううりのれんか ア			7. No. of boxes
(See Instructions	o (e) spouse			· · · · · ·		- checked on 6a and 6b
on page 8.)	c papandents:	(2) Plack (3) Ha	jo 5 ar older, dopendent's		(5) No. of moeth	No. of your
	(1) Name (first, leitial, and lest mame)	ege 5 50	cial recurity number	(4) Relationship	lived in your hom in 1938	w children on 6c
	•	<del></del>	<u>:</u> :			• lived with ye
16	-	<del>  </del>				• didn't live w
If more than 6 dependents, see		<del> </del>				you due to divo  or separation
Instructions on page 8.		<del>                                     </del>			<del> </del>	- No. of other
page O.				····		dependents list:
	d If your child didn't live with you but is cla	imed as your dene	ndeat water a are 105	26 2002		
	e Total number of exemptions claimed	<u>a</u>		o ogreenent, check	Kinere . ►L	entered on lines above
Innama	/ wages, salaries, tips, etc. (attach Fo	orm(s) W-2) .			7	
Income	8a Taxable interest income (also attaci	h Schedule B if a	over \$400)		. 82	
Please attach Copy B of your	b Tax-exempt interest income (see page 9 Dividend income (also attach School	: 11). DON'T incl	ude on line 8a 8b	<u> </u>		20
Forms W-2, W-2G, and W-2P here.	The state of the s	Ule & If over \$40	90)	· · · · · .	9	
If you do not have	10 Taxable refunds of state and local inco 11 Alimony received	me taxes, if any,	worksheet on p	age 11 of Instructi	ions . 10	<del></del>
a W-2, see	12 Business income or (loss) (attach Sc	hedula C).	• • • • • •		11	~
page 6 of Instructions.	13 Capital gain or (loss) (attach Schedu.	le D)			1 13	
	A Calural Rain distributions not reporte	ed on line 13 (se	e page 11)		1 14	
	19 Other gains or (losses) (attach Form	4797)			15	
	168 Fotal IRA distributions 168		16b Taxab	le amount (see pa	ege 11) 16b	
	17a Total pensions and annuities 17a		17b Taxab	le amount (see pa	oge 12) 17b	
		s. trusts, etc. (a.	ttach Schedule E)		18	
	<ul><li>Farm income or (loss) (attach Sched)</li><li>Unemployment compensation (insura</li></ul>	<i>110 F)</i>		· · · · ·	19	<del> </del>
Please	21a Social security benefits (see page 13)	suce) (see page	13)		20	<del> </del>
attach check or money	b Taxable amount, if any, from the worl	ksheet on nace		- 2/6		1 _
order here.	22 Other income (list type and amount—	-see page 13)		•	<u>21b</u> 22	108
	23 Add the amounts shown in the far right of	column for lines 7	through 22. This is	your total income	. ▶ 23	379,5
Adiustasia	24 Reimbursed employee business expense	s from Form 210	6, line 13. 24			1113
Adjustments to Income	25a Your IRA deduction, from applicable w	vorksheet on pa	ge 14 or 15 25m	2000		
111-0111	<ul> <li>b Spouse's IRA deduction, from applicable</li> <li>Seif-employed health insurance deduction.</li> </ul>	: worksheet on pa	ge 14 or 15 25b	250		Į.
	26 Seif-employed health insurance deduction	from works have or	page 15   26			4
	27 Kengh tahuanan dan ada ada	HOW WORKSHEET OF				4
(See	27 Keogh retirement plan and self-emplo	yed SEP deduct	ion 27			ļ
(See Instructions on page 13.)	27 Keogh rebrement plan and self-emplo 28 Penalty on early withdrawal of savings 29 Alimony paid (recipient's last name	yed SEP deduct	ion	<del></del>		-

3 Control Number 4 Employer's State 012755	W. AND TAX ST	FATEMENT FORM	W-2 ( )	ILROAD RET	
2 Employer's Name. Address and Zip C CONSOLIDATED RAIL CORF ROOM 207, 15 N. 32ND STREET	PORATION	YEAR ▶ 198	7 TI	TAX WITHH ER I - : ER II - :	2.153.98
PHILA., PA 19104-2849  8 Employee's Social Security No.	3 Employer's identificati number 23-1989084			lie Taxable Fring Included in	e Benefits
288-22-4006	9 Federal Encome Tax Hithheld 3,801.72	30,125.50	Comp	Cost of Group Ter Included	
C STEIMLE	3200 539	OHIO Name of State or City		986.64	30,125.50
12224 LORAIN A CLEVELAND	629895 OH 44111	CLEVELAND CIT	Y For emp	602.52 ployee's re	30,125.50 ecords
Inla information is being	furnished to the Internal Reve	bas	appropriate s	tete officials freatury internal	· .
9 844 RUSH STREET CHICAGO, IL 60611	SICKNESS INSURANCE	Year	133 C	opy C For Gyee's records	
Employee's social socurity number 283-22-4-005		775.00	sec. tan withheld .	Soc. sec. wage	
Employee's name  C STEIMLE  12224 LURAIN  CLEVELAND	AV 6M 4411	State or local has withheld State on local has withheld	State or local wages		or locality
Employee's address and ZIP code		The social security rain of		elatement furnished by agreement with your state	
Employee's adures and Zir code		tor heapited transports benefits and	% for	r retirement, survivers, sed	Disbling burranca
CONRAIL/UTU PA MUNTINGTUN BAN 917 BUCLID AVE CLEVELAND SIN	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6 Allocated	December	T APVance Inc	Curnished Service Textive Service Dull Come back
TR Employee's		10 Social securit	929-26	11 Social arcienty	and withhelp —
CLEVELANG		EXERNAX	100-44		etri 10.94
Form W-2 Wage and Tax St		1 + 6 + CO	3929	24 ON10	1

									200 (1)			200
				;								
								6/1	g n st	· C	OPY	
	§ 1040			l the Tirasury—Internat Re			7				•	
	- 10 10			<u>lviduai Income T</u>				(3)		. 19	OMB No 154	E 0074
	Label	Ä	the year J	onDec. 33, 1987, or other to CAR-RT 50			, 1987, I			·	applalaceurity num	
		C	B 288			9977 517						
	Use IRS label. Otherwise,	(	HRIST	8 BETTY J		MLE JR		Instructions	)	Spou	se's social sacurity	number
	please print or type.			LORAIN AVE			0	285		ļ	<u> </u>	
		I.c	FEAEI	AND OH		44777		,•	. :		rivacy Act and Paperw po Act Notice, see Inst	
	Presidential		D					Vac V////		,	Note: Checking "Ye	
	Election Campaign	n 🕨		vant \$1 to go to this fur eturn, does your spous						No	not change you reduce your n	1U1 (29 D)
		1		Single	· · · · · · · · · · · · · · · · · · ·			II	84			
	Filing Status	2	V	Married filing joint return	n (even if on	ly one had income	)					
	Check only	3		Married filing separate set								
	one box.	4		Head of household (wit			e 7 of I	instructions.) If th	e qualif	ying pe	rson is your child	but not
		5		your dependent, enter c			e died	<b>&gt; 19</b>			entions )	
			Caution	Qualifying widow(er) wit If you can be claimed as a							No. of boxes	
	Exemptions		(	do not check box 6a. But b	e sure to che	ck the box on line 3	2b on p	age 2.			checked on 6a	2
	(See	_6a				Spouse					No. of children	
	Instructions on page 7.)	C	Depend	erats first, initial, and last name)	(2) Check if under	(1) If age 5 or over, dep social security num		(4) Relationship	(5) No. o lived in y		on 6c who lived with you	
					age 5			ļ	ia Ì	987	No. of children	
	1					: :		<b></b>			oo 6c who didn't live with you due	
led to	I more than 7					<u> </u>		<u> </u>	<b></b>	$\dashv$	to divorce or  separation	لنسا
marked specia	f more than 7 dependents, see instructions on					ŧ   ŧ					No. of parents listed on 6c	
indipations you				·					<u> </u>		No. of other	
ributions shown	1				-						dependents listed on 6c	
Amounts ov	ļ	d	l If your ch	ild didn't live with you but is c	laimed as you	dependent under a r	ore-1985	Sagreement, check h	PIP.		Add numbers	
i. you may be ab		e		mber of exemptions claim							entered in boses above >	4
structions for y	.1	7		salaries, tips, etc. (attach						7	34830	
—If more than 187 and more th	<i>1</i> .	8		interest income (also atta						8	1735	-
tax, railroad returnty and RRTA I	iPlease attach Copy B of your	9 10		npt interest income (see pa t income <i>(also attach Sche</i>						10	26	
as a credit again	forms W-2, W-2G,	11		efunds of state and local in						11	189	$\vdash$
30 of 7, 15% inch	f you do not have	12	••	received						12		
insurance. The stain governmen	% W.7 top	13	Business	income or (loss) (attach :	Schedule C)					13	(3336)	
to medicare amo	Instructions.	14		ain or (loss) (attach Sche	-					14		<u> </u>
return, you ma er sanctions if t	r.			ins or (losses) (attach For		. <u>.</u>				15		
ortit.				, IRA distributions, annuitie amount (see page 11) .				27.91	<u> </u>		• / 0 8	
The Pile Af		17		byalties, partnerships, est:					• •	16b	2698	<del>                                     </del>
eq.		18		ome or (loss) (attach Sch						18		$\Box$
		19	Unemplo	syment compensation (ins	urance) (se					19		
	Please attach check			curity benefits (see page	•		20a				•	
	or money			emount, if any, from the w						30P		
	order here.	21 22		come (list type and amour mounts shown in the far rig			-21. Thi	s is your total Incor	ne Þ	21	71,115	_
		23		sed employee business ex			23				36142	<u> </u>
	Adjustments	242		deduction, from applicab	-		242	2000				ĺ
	to income	b	Spouse's II	iA deduction, from applicable w	orksheet on pa	ge 13 or 14	24b		1			
		25		oyed health insurance deducti			25		-			Ġ.
	(See	26 27	_	tirement plan and self-em		•	26	· · · · · · · · · · · · · · · · · · ·	-			İ
	Instructions	28		in early withdrawal of savi paid (recipient's last name	-		THE STATE OF THE S	<del></del>				
	on page 12.)		and socia	security no.		) .	28				·	
	ldinet			23 through 28. These are line 29 from line 22. This				hie line in form 40	. >	29	2000	<u> </u>
	djusted			and a child lived with you							<b>.</b>	]

Confidence	Employer's State L.D. reumber	948 No. 1848-0008	Сору		
0.104124900 October	The beautiful to proper the	Employer's Identification w	For employee's This information is be	records	
SUMAXIZUKU PROBUC HUNTANGTON MANA	TIVITY TVES 6.18	Service Course with	to the Informat Rever earling of the Treasury line for Street Victoria	tue Service real Revenue S	
CLEVELAND UHLU ALL	in year or confined and ——————————————————————————————————	in Com. 2 to your 1925 sta	Str/ Childs VEYAR	Di payment	res <u>Carlos</u> Tarlos
284-122-11452-15-15-15-15-15-15-15-15-15-15-15-15-15-	D Federal Income tax withheld	Hi Wagna, Opo, other compensation	nonclubba II our land	ity tax within	u — 3/1/5
the grad more than one	420525coo	sift you and or hell sikel Pali	April 21,8 are 11,2	schrift ihn —	
elegity incloves tax, ratioad, or each and action of the control o	A Cost handlesia ait) 1456 (175) tappopilini 1557 XET A (175) tan		n 1040X. you expect to	mekat	81: 81:
1502 1950 and 1505 in retirement	of the second se	State income las 19 State	orom to GO	Marke of Stale	<u> </u>
om W-2 Wage and Tax Statemen				lafting for hocality	
1 Control Number 4 Employer's State a	WAGE AND TAX ST	ATEMENT FORM W-	RATIRO	An pr	rirement
CONSOLIDATED RAIL CORPORTS OF STREET	44	YEAR ▶ 1986	TAX TIER I	WITH -	HELD 2,261.29
PHILA., PA 19104-2849	3 Employer's Identification number 23-1989084	n 7 Advance EIC payment		Group Jes	1,193.56
288-22-4006	Federal Income Tax Hithheld 4,793.12	10 Mages. Tips. Other Co 31,626.56	mp Texable	Fringe Be	rnafits lacluded
C STEIMLE	3200	OHIO	Tax With	43.11	31,626.5
12224 LORAIN A CLEVELAND O	539 629 <b>895</b> H 44111	CLEVELAND CITY	Tan Mith		lenable Mage
	wrnished to the Internal Revenu	1 111 2 111 OF W	For employed states of propriets state of		ecords

			ember 31, 1986, or other tax year begins	ine	1000	A 24				
Use			CAR-RT SORT		, 1986.			. 19	OMB No. 15	
IRS label	СВ	288	B-22-4006 297-14		R 15 14	et name		You	or social security m	·mber
Other				1-9977 SOO IMLE JR		nstructions.)			<u>ii_</u>	
wise, please	122	24	LORAIN AVE	אורב או	n	ristructions.)		Spe	ruse's social securit	ly numb
print	LCLF	VEL	AND OH	***	685M_	1	<del></del>		L	
or typ	e.			44111	2	II this	address is	differe	nt from the one	
	dential	<u> </u>	Do you want \$1 to go to this fu	ind?			nonner -		urn, check here 1	
Llecti	on Campaig	n /	If joint return, does your spot	use want \$ 1 to on to t	his tund?	Yes	<i>                                     </i>		Note: Checking "I not change	res" will vour lax c
		1				Yes Yes		No	reduce your	relund.
Filing	g Status	2		rn (even if only one had		THE PLEASE F	sperwork K	eduction	Act Nolice, see Ins	truction
Chast		3	Married filing separate se	ture Ceten in only one nag	income)					
Check one bo		4	Head of household (will	turn. Enter spouse's social	security no. ab	ove and full nam	e here			
			but not your dependen	th qualifying person). (So t, enter child's name her	ee page 5 of in	structions.) If I	he quality	ing pers	on is your unman	ried chil
		5	Qualifying widow(er) w	ith dependent child (yea	e	<b>- 10</b>			<del></del>	
r		6	a Vourself	65 or over			ee page 6	or Instr		
rxem	ptions		b Spouse	65 or over		Blind			Enter number of boxes checked	-
Alum	s check		c First names of your dependent ci		***	Blind			on Ga and b	امر
the bo	x labeled	•:	,	who were with yo	·u				Enter number of children	
Yourse Check			First names of your dependent of	hildren who did not time	with way to a				isled on 6c	L
boxes	if they		(If pre-1985 agreement, check h	ere > .)	vuu kon (see b	age b)		<del></del> '	Enter number of children	
apply.			Other dependents:		(3) Number of	(4) Did dependent	(5) Did you	. Debuida	listed on 6d 🕨	L
_			(1) Name	(2) Relationship	months lined in your home	have income of \$1,080 or more?	more than o	me half of	Eates number	
***	1					\$1,000 to HIGHE:	Gependen) (	sapport?	of other	1
-	1				<del> </del>	<del></del>	<u> </u>		dependents ▶	
	<u> </u>		Total number of exemptions claim	ned (also complete line )	36)	L	L		Add numbers entered in	
		7	Wages, salaries, tips, etc. (attach	Form(c) W 2)	<del>,</del>	· · · · ·	<del></del>	<del>i                                    </del>	baxes above >	14
	ne		Interest income (also attach Sche	rivings) W-2)	• • • • • •			14	35411	85
	altach	9:	Dividends (also attach Schedule B	ifover \$400)	1			8	1133	22
	of your W-2, W-2G,	4	Subtract line 9b from line 9a and e	enter the result	, 70	Exclusion	!	9c	•	
	2P here.	10	Taxable refunds of state and local in	Nome taxes if any from	lho washehasa			10		ـــ
	lo not have	11	Alimony received	· · · · · · · · · · · · · · · · · · ·	nic worksiteet (	on page 4 of Ins	tructions.	11		<del> </del>
	s <b>e</b> e ol	12	Business income or (loss) (attach:	Schedule C)				12	/ 2071	
	tions.	13	Capital gain or (loss) (attach Sche	dule D)	• • • • •			13	< 2979	15 Z.J
- 1		14	40% of capital gain distributions r	of reported on time 136				14		┼
- 1		15	Other gains or (losses) (allach For	rm 4797)	see hake 3011	· · · · · · · ·	• • ;•	15		├
- 1		16	Fully taxable pensions, IRA distrib	ulions, and annuities no	transitad on t	ina 17 tana		16	<del></del>	├
ſ		17=	Other pensions and annuities, inc	luding rollovers. Total re	ceived   17a	me 17 (see paj	(89) 1			├—
- 1		ь	Taxable amount, if any, from the	worksheet on page 10 c	f Instructions			17b		
ļ		18	Rents, royalties, partnerships, est	ates, trusts, etc. (atlach	Schedule F1			18	<del></del>	<del>  -                                    </del>
		19	Farm income or (loss) (attach Sch	edule F)				19		<del> </del>
279		20a	Unemployment compensation (ins	wance). Total received	20a	· · · · · · · · · · · · · · · · · · ·	· j · ·			┰
فسف Hach c	herk	Þ	Taxable amount, if any, from the w	orksheet on page 10 of t	nstructions .	, ,	-	20Ь	•	[
# mone	₽y	212	Social security benefits (see page	10)	212		_1			<del> </del>
rde he	ere.	ь	Taxable amount, if any, from work	sheet on page 11.	rempt	1		216		
		22	Other income (list type and amount—	see page 11 of lastructions)_		,				<del> </del>
		22	Adden					22	•	I
	<del></del>	23	Add the amounts shown in the far rig	ht column for lines 7 thro		your total incor	ne . >	23	33566	22
dinet	ments	24	Moving expenses (attach Form 39	03 or 3903F)	24					C.
o Inco		25	Employee business expenses (atta	ch Form 2106).	25					
- 11111	-1116	26	IRA deduction, from the workshee	l on page 12	. 26	200	000	WWA.		
ee		27	Keogh retirement plan and self-em	ployed SEP deduction	27					
structi		28	Penalty on early withdrawal of savi		28					-
a page	11.)	29	Alimony paid (recipient's last name		and William	:				
			social security no.	1	29	•	.			
			Deduction for a married couple whe							

10	288224	U(16	Bûdirase — "19 enda			oyer's identification			lopy C loyee's records	
i	ONFATE	מאיל עדעי	Male Serti	4 A 5 67 % =	04	₩27782				
H	UNTTAC	THEBNIK	C TOHER	ני פער. מח	5H 🖛	FORA F	استروبوا والمراد	111.12 [20.2	्रे के दिल्लाका क्षात्र है। इ. के दिल्लाका क्षात्र है।	V-W-
4	17 EUC	DI AVE,	ren i de la como de la como de la como de la como de la como de la como de la como de la como de la como de la La como de la como de	nger in de name and a se	coel	- 8 Allocator			7 Advanta BC paymen	
l u	ぶんへをむかり	MOMBHIN (	44119 67:		100		NUCY HEW		le Copy R'of	
	B Employed's sort	سنسد سناسله بالماسوة	بروسيدة والمستعد			0 Wagen tips other	r compensation —	<u> </u>	Social security tax with	held —
		ion 503 noi			59	and the same	1342.9		nga sagana	
1	re than en	12 Employee's name	address and ZP code		** ***	13 Boetal äbens	the manner -		is Social populty type 1711 - 71 - 2257555	
	TE YM	r 1881 galada Wyologia yta	្សាស្ត្រ។ ជា ប្ត <b>្</b> មារីសាសាស្ត្រ។	1288284	609				September 5	
3	2224 L	RATH A	nna vertet di Solitorio di di	Marketing of the second of the			X XIIIGK B		XXXXXXX	XX
Ç	LEVELAN	🚹! ernoami le	30) <b>111-1</b>	San Harris	171	ists income tex	タリー サリー 一一 # Shire w	o D F F F	10 Hame let St	
- 14	noshiesin	ng wasa katal ngganingnan	ัก XEโ ยัสเอสาว เพศ โดยีก โ. พ.	ngrifigation). South State	1 .	o gravita		49 . Q4	m 1040K.	
	יין פיבלימילפון	ยสการสาราบไรร	cr. ber. car	ny state	· - 4	ocal income har	ti Lotal or	12.096 Bershi	DOU TO A TOU	/ II
Fo	m W-2 Wa	ge and Tax	Statement	1985	, ,,,,,,	Lena desta Tital	5 5 4 18 A	TO THE	and and	101
<u> </u>			f the Treasury Islamal Re	Nerve Saryke	<u>. 1</u>	ihis information	ls being fumish	neiniert al b	al Revenue Service	نند
				44.00		<del>'</del>	*			
2 tm,	Notar's Name, Add	● I Contro	tecterul lo		-	Employer's state	number	FOR A	OFFICIAL USE C	
	111001 m		CORPODA	TION!	Sub Tatas	Cor	Wolf		ROAD RETIR	
nq	QM,207, 15 N	NED⊅RAIL OHTHBENDST M-2849	REET	TON TON			(E) 1	r idwa	TAXWITHE	FD EWENT
	LA, PA 1910	4-2849 1940131 Q 10 221	Marine And Che	23-1 989094		וכפ ל יים טיפות זכפ ל (ריבון	ndo DC payment	31 men	Ltaum D. T. C.	
. Blam ⊐refici	Spring Spring Secret	The part of the pa	d pecine Tex William	16 v L 110 Wages	Tipe, Other Come			TIER	1 Inuomi 1 (3)	9.50
12 Gran	-	10 V May 200	528 <b>-</b> 58	10401	30813	R S el la car	Group Term Lib beckeded in Bod 2	Metudos	th Best 10 TA TRUIST YEL	1.4
							ci decimal as	A	11.0000	
16 Epoply	deg's bloom and	Part of the state	to: Social Sec	HO DEIO	addins.	o je min	างว่าร โธเวต	THE PARTY OF T	il allowed	- <b>5</b> 2
173	ZA"LUX	HUTCH THE THE THE THE THE THE THE THE THE TH	Social security	TO TRUE				1:22 L 2 C D/	Taxable range	11 - 1
	KILL NO.	17 47× 023,249 - <b>1</b>	H 4411	Name of St.	no de Charles Sci	d big maler	ist or he	t (brinis)	30813	-85
	16 of 7 05%	I VII (O) EKINO	ocome"tak. (≦16 struktions.) The	CLEVE					Tax Michael	
	<i>ב</i> ער איז כפ	inchighter from	1 35% for hor		v lutin	File Learne	WHEN PER SE	PO na Swe		-24
RO.	38525 6	29895 32	00 539				(A) 2' Either Cl	With A rain.	5 3 50813	-85
	<del>:</del>		13		. Tris Mornedo	Copy C for er	mployee's re			3 2 3
								apate som a	CANA .	
- 310	TYPE	PERIOD EARNING	AMOUNT		DUCTIONS AN	DADJUSTMEN	118 Foreign	V45		
PPL	PYMT		6d17	TYPE	AMOUNT	TYPE	AMOUNT		OTHER PAY INFO	
		100		EETRA	4700- 255	EETR1	430	TIER	1 EMPLR	- 3
	:			1 7	1			PIER	2 EMPLR	
		·		1						
				1 - 1-				1 :		
·					1			· ·		
TE	MLE			288-22-	4006 0	- 20022	100	<u></u>		
نبر		EE HAME		SOCIAL SECUR	τυυο U πγκο	EMPLOYEE	4006		86 1 MD	
NY		FED ING. TAX	ZEFICA :	STATE TAX	SDI/UC	LOCAL TAX		PERIOD EN	751100	_
-	601 7 601 7	1203	3-f0						4015-	NET I
			NOTE	CHOO			1 15 2 33			8
			FOR TA	שוום או הפוום או	EMENTAL	PAYH	ENT IS	CONS	I DERED	
		OVER1 AN	D OVER2	X PURP	FFUNDS	UE EE	EARNT	VGS	· ·	
				_ ,,,		טי ככ	にいいたり	> 198	RRB TA	X

t or the year i	L								· · · · · · · · · · · · · · · · · · ·		OMB No. 154	45 M
			1985, or other tax				, 1985. e			. 19	Social security nu	
Use IRS			ial (if joint return. ر					name			18 22 40	
label.	Draward by	rist	number and stree	erry		Jec.	m le	Vr_			rd: 22 : 70 ne's social security	
Other- wise,	r resent no	me adoress (	number and stree	i, including apar	ument ot	under, or curarro	oute)			1 ''		
please	City, town or post office, state, and ZIP code  Your occupation April									97: 14:95		
print or type.	در دار دار دار دار دار دار دار دار دار د	In wa	land,	"olio	•	4111		Spouse's occupa			Conductor	
Presidenti									mmm	No No	Note: Checking "Y	'es" wa
Election Ca			want \$1 to go return, does					Yes Yes	<i>‱</i> :	1,10	not change y reduce your	ygur (a.
		. 1	T	7001 300030		T to Bo to the		1	CCCCOCA		Act Notice, see Ins	
Filing Sta	atus	;	Single				B		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		4				only one had in	-					
Check only		3	1	•		spouse's social s	•					
one box.	•	•	1				-	structions.) If 1	ine quality	ring persi	on is your unmarr	rieo C
		5	1	•		d's name here. ent child (year		N 10 1 /	ee page (	of lastr	uctions 1	
				idow(er) with	rependi	······································	spoose tret	1 1	- <u> </u>	0 0 0 10 15 17 1	Enter number of	
Exemplic	ons	68 2	Yourself		-	65 or over		Blind			boxes checked	ر ا
		D [	J Spouse	4		65 or over		Blind	,	. ;	on 6a and b	
ys che		c First n	ames of your de	pendent child	ren who	lived with you	·				of children	1
box lab	eled	. =: .								;	) listed on 6c ► ) Enter number	<u> </u>
ckothe			ames of your de 1985 agreeme			odd not live wi	th you (see þ	age 6)			of children	
on a long if the	ey .		dependents:	n, check here		·1	(3) Number of	(4) Did dependent	(S) Did w	ou provide	isted on 6d	Ь.
() A \$ .		e Onier	(1) Name		(2)	Relationship	months lived in your home	have income of \$1,049 or more?	i more than	one ball of a support?	Enter apmber	
					╁	····		71,049 G BAITE:	orpeneria	з заручи:	of other dependents	
					-						Add numbers	느
* 0 f		f Totals	number of exem	ntions staimed	l also s	omniete line 3	<u> </u>	L	ـــنــــــــــــــــــــــــــــــــــ		entered in	د
37									<del>- : · ·</del>	7	bozes above	10
tome		_	s, salaries, tips, (	•		-				8	1963	_
ette atta	ch		st income (also a nds (also attach :				.9b				7763	77.
y Boly	DUT		ict line 9b from I							9c		1
ms W-2 W-2Ph			e refunds of state						tructions	10	131	193
Lunge			ny received			s, 11 ony, 11 on t	INC MOINSHEEL	on hage 2 or in:	și octions.	11		Ť
bu do no 2, see	Allere 1		ess income or (lo	 ss)/attachSci		 I				12	(2082	2 93
tructions			l gain or (loss) (	• •			• • • •		• • • •	13		1
tructions			f capital gain di:					Instructions)		14		
·   .			gains or (losses)			-	-	-		15		$\top$
	_		axable pensions	-	-				pe 91	16		1
r,			pensions and an						) 			1
	_		le amount, if an							17b		ı
L	1		royalties, partn							18		T
	,		income or (loss)	•						19		Т
	_		ploymentcompe			otal received	20»					
Please			le amount, if any	-	-		nstructions.			20b		
attach chec	:k 2	1a Social	security benefit	s (see page 10	). Total		[21a	L	L_			T
or money order here.		b Taxabl	le amount, if any	, from worksh	eet on p	page 11. Taxes	sempt vesi			216		
	2	2 Other i	income (list type	and amount—see	page 11	of Instructions)		, 				
										22		
	2	3 Add lin	es 7 through 22	. This is your l	otal in	ome	<del></del>	· · · · · · · ·	<u>. , ▶</u>	23	3217/	7.
	2	4 Movin	g expense (attac	h Form 3903	or 3903	IF)	24					
Adjustme		5 Emplo	yee business ex	penses (attach	Form 2	2106)	25		_ _	_0000		1
to Income	e 2	6 IRA de	duction, from th	e worksheet o	n page	12	26	200	20 00	2000		
	-		retirement plan				27					
(See Instructions	_		y on early withd		ζs		28				• •	
on page 11.			ry paid (recipient's	_			and William					
	•	•	• • • •			. )	29					
	3		curity so tion for a marrier	couple when	both wo	isk (attach Schedu	љи) 30					l

· · ·	Egylopi Santo ID		W STATE W	ge and Tax Stalement DMB No. 1545 0008
•	CONNECTED OF PRODUCT	IVLTY	1 1 272 de 1	Capy G For employee's records  Distrement on a finite year markers for some some some some some some some some
		KUS, LEE		
	section mass 102107		8 Allocated tips: 7 A	dvance EIC payment
	s training South Marin pumper. I Faid the 26 of 22 of 20 of 25 of		Wages, tips, other compensation	n 11 Social security lax willing
1	th Employer's paper entropies, and Zip code		13 Social security wages	14 Social Sequity lips 0 5 0 0
	LEVECAND UH	49111	16	Secretary 1
		47.17.14	17 State Inpaged Inc. 19 State v	opes dp. es Brande stadus
		and the second	Wiles Inches les 1 - 1 71 (beal)	A CONTRACTOR OF THE PARTY OF TH
F				
1984	A 1 Control Number  [A Employer's Plane, Address and Zip Code  CONSOLIDATED RAIL CORPORA	Sub Total	4 Employer's state number	FOR OFFICIAL USE ONLY
	NROOM 207, 15 NORTH 32ND STREET	nployer's identification (1997)	38 of Allocated Tipe and in 1949	Advence EIC payment
EN EN	B Employed a Social Security No.   B Federal Income Tax Withhe	23-1989084 10 Wages, Tips, Othée Co	no Cost of Group Term L	de de constant
ATE	288-22-4086 2538-15	19666		भाग विकास करिए ।
AX ST	C. STAIR VEH. TO SEE STAIR SEE	ONIC	દાલાઓ પ્રેમેલા હતું દિવસાય (૧૯૦૦)	389.69
D TÀ	12224 L CA/18 A	<b>L</b>	, de la lace de la companya de la companya de la companya de la companya de la companya de la companya de la c Historia de la companya de la compa	15 € 00 - 33
E AN	CLEVELAND rose conservate CH	CLEVELAND		392.13
WAGE	pungasan yelijikat teritori in se in iname		offices Objects in terro	19666.33
- 2	CR039635 629895 3200 539	This but	Copy C for employee's remaining to being furnished to the IRS and a	
SE XO	U.S. RAILROAD RETIREMENT BOARD UNEMPLOYMENT & SICKNESS INSURA	NCE Year	1984 Wage and	Tax Statement DMB No. 1545-0008
1:221	844 RUSH STREET CHICAGO, IL 60611 36-2165433		employee	
	Employee's social security member   19 Federal Income lax withheld   288-22-5006	10 Wages, Ops, other companies 1321+0	O CONTRACTOR	
		Pensien plan toverage? Yea/No	Affocated tipe	Soc. sec. type
	STEINLE	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		State or locality
	12224 LOBALM AVE	State or local tax w	general and a second	State or locality
W2 -				ment furnished under reement with your employer.
	apployee's address and ZIP code		meanity rate of still artists of still a	COM STATEMENT ST
1		100 Andrews (100 and 100 and 1	•	

	year sanuary i	-Dece m!	er 31_19	84, or other tax y	ear beginning	:		100	, ending				. 19	OMB No.	154	5-007
Use			فالتنبيب	R-RT SO			≉≎CF		ast name					social security		
IRS label	CB 2	88-	22-4		7-14-9	977	S17 3	1 (	ast name							
Other-				TTY J		ILE JR		Ď				<del></del>	Spou	se's social sec	urlty	לווועה
wise, please	1222	4 L	ORAT	N AVE				B10 0					}	: .		
print		/ELA	ND O	H		94 1	11	3	Your	occ opatio	N	71/5	ord	Condu	10	7/
or typ	<b>b.</b>		·					.,		e's occup				o Opero		
	lential		Do you v	vant \$1 to go t	o this tunc	j?			ī.]	Yes	1111113	7	No	Note: Checkin not char	Ye.	5 ' dry/
Election	on Campaig	n / 1	f joint r	eturn, does yo	our spouse	want \$1	to go to t	his fund?.	·	Yes	Willian .	1	No	reduce)		
		1		Single				For	Privacy A	ct and F	aperwi	ork Re	duction /	kt Notice, see	Instr	octio
- Filin	g Status	2	~	Married filing	joint return	(even if on	y one had	income)								
Ch-st	1.	3		Married filing s	eparate retui	rn. Enter spe	nze, z zocial	security no.	above and	full nar	ne here	:				
Check one bo		4		Head of house	hold (with	qualitying p	erson). (S	re page 5 of	Instructi	ions.) If	the qu	alityir	ng perso	n is your unr	htten	ed ci
				but not your d				· <del>-</del>						· •		
	·	5_		Qualifying wid	low(er) with	dependen	child (Ye	er spouse die	ed ► 19	<u>).(</u>	See pa	ge 6 c	ofinstru	ctions.)		
		~~ 6a	1	Yourself	•		65 or DV	er '			_  BI	ind		<ul> <li>Enter number</li> <li>boxes checker</li> </ul>		
Exem	ptions	b		Spouse		L	65 or av	er _		L	J BI	ind	1	on 6e and b	<b>•</b>	1
<del></del>	<b>Jcheck</b>	E	First na	mes of your dep	endent chil	dren who li	red with yo	Dan Dan	<u>rel</u>				]	Enter number of children	'	
	labeled				r			Lan Marinia	(4) Did di		75.2			listed on 6c	<b>.</b> .	<u>_</u>
	other	đ		ependents: (1) Name		(2) Relati	onship	(3) Number of months lived	Name int	ome of	moret	id you p han one	No Med	Enter number		
1. E-2.55.22	they			())				in your name	\$1.000 0	thore!	de pen	dent's su	pport?	of other	_	
	1		<del></del>					<b></b>	<del></del>					dependents Add numbers	•	<u></u>
	1		Tatala		<u>-</u>	A (-1		<u> </u>	<u> </u>					entered in		Γ
or Individuals	<b>}</b>			imber of exemp					<del></del>	<u> </u>	<del></del>	<u> </u>	7	boxes above		<u> </u>
lo retire soon	]	7		salaries, tips, et							• •		8	210		-
ne either by	<b>[</b> "	8		income (also at				ŀ				ı ·	WIRING	20	ZZ	13.
05, Tax With	attach			ds (also attach So					Exclusio	n		L	9c			١.
asII more	of your W-2, W-2G,	30 20		t line 9b from lin of State and loc										<del></del>		<del> </del>
g 1984 and mployee tax	2P here.			nt unless you ite								nier	10		•	•
-	do not have	31		received	·.	מוז ועוז בייטאו.	INC LONES PI	an camer ye	a13ct	Mage 3)	• •	• •	31			$\vdash$
claim the en	see	32	-	s income or (los:	S) (attach Sc	hedule C1					•		12	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	47	28
chots. The a	of ctions.	13	_	gain or (loss) (al	• •	•				• •		٠,	13			
of a 0.3% co benefits and		14		capital gain dist		-			o! Instru	ctions)			14			
Insurance.		15		nental gains or (								• •	15			!
		16	_	able pensions.									16	****		Π
		178	Other p	ensions and ann	uities, inclu	ding rellev	ers. Total r	eceived [17	'a				<i>1613</i>			i
				amount, if any									176			
	•	18		oyalties, partne									18			
		19		ncome or (loss									19			1.
1		20a	Unempl	loymentcomper	sation (insu	rance). Tol	alreceived	20	)a	13	125	00		_		
Please attach	check	ь	Taxable	amount, if any,	from the wo	rksheet on	page 10 o	Instruction	s				20ь	13	15	00
or mor	ney	212	Socials	ecurity benefits	(see page	10 of Instru	ctions) .	[2]	0		1	L	Wills:			
order	nere.	Þ	Taxable	amount, if any,	from the wo	orksheet on	page 11 p	f Instruction	s				215	<del> </del>	-	L
		22	Otherin	ncome (state natu	re and source-	-see page 11	ot Instructio	ns)								
													22			ㄴ
		23	Add line	s 7 through 22.	This is your	total inco	mt		<del></del>	<del></del>	<del> ,</del>	· <b>&gt;</b>	23	223	22	01
		24	Moving	expens <i>e (allaci</i>	Form 390.	3 or 3903F		24			!		100			İ
•	stments	25	Employ	ee business exp	enses (altac	h Forni 21	06)	25					34.4			!
to In	come	26a	IFA ded	betton, from the	e worksheet	on page 17	<b>:</b>	26		س7 ر	C.C.	OC		•		!
(See		Þ	Enter h	erc IRA paymen	its you mad	r in 1965	ihat aru m	stices 🔂			!	1	1			<del>.</del>
Instruc Bons o		-	in line 2	6a above 🕨 📙						٠	Į					~
page 1		2?	Paymen	its to a Keogh (/	f R   10) reti	rement pla	n	27				_,_	16.00		1	
		28	Penalty	am analy, without	wel of sour	181		28			i		1.			:
		20	, coany	on early withdra	JEVI	e			1		,		Will in	1.0		
			Alimony	-				29 30 (18)						1.55° - 1.	-	1

•		1333			State I.D.	<b>1788</b>		198	Wage at	nd Tax Stateme	ni OMB No. 1545-00	103	
:	٠	2 Employing	hante addition			VL1V 9	3 5-	777626		arest diffe factor	mglayee's records riminal Arrena Simila		
)		STATE	TO DECE	MAAN	i Julia		);;			This information is the IRS and Econol	de op fumished to deta Data etitista.		
			LK ALD		un entite								
			44.4	3.057.0	्रिलेश्च ध्रम्म । विक्रिक्सम्बद्धाः स्टब्स		الدة بيد	ocated tips	7 Advau	тся ВС раука	ent 2		•
	-	8 Employee	social security		Ellingung.	aid whiteleft of t	dirict com		``  **	STATE OF THE STATE			
		M. A. S.	c Thur		n: ZV	9.78		biocopponerco	mpensation 274		curity iso within	je	45.94
	,	12 Employes	e neine addition	and III code	विक्री प्राप्त के की जरभण्डा जिल्ला		13 S	cial security ways:		14 Social se	curity tips	<b>§</b>	
		12224	LOKAT				7 16				0.00		
			ANU	t grad die bei	uH.						were's		
				tion to we	anista of a		73 50 17 50 47 70	U.60	19 State wages	U.00	19 Marine et Baire		
						10.2		**************************************	21 Local wages		22 Hame of locality		
		NA STATE	3.34	30.7		1		0.00	1				
<b>?</b>	CD			6 1 Control Nurs						500.01	FICIAL USE O		
	<b>8</b>	. 2 Employor's Name.		ade		24.	Sub- Towl	Employer's attas num  Con- rection			CO SOLLOSE O		} .
1	<b>(</b> -)	RM 207, 15	DATED F NORTH 32N	RAIL CO	RPORATI	ON					*1.51 to Y	`	<u> </u>
1	ENT	PHILA, PA	19104:ne n	giturii e 19	Nam	23-19890	' tone 84	8 Affocated Tipe	in the 2.4		Concording on		
ì	M.	8 Employee's Social 288-22	Security No.	9 Factoret Inc. (AD: 3) 1 14	ome Tax Witheld	1227	16014	Coot of G	roup Term Life schuded in Bos	10 A 101	corne 3x reti		S. S. S. S. S. S. S. S. S. S. S. S. S. S
Ì	₹.	288-22-	First, Middle, Land	्रक्षेत्र स्टब्स् अस्तरकारकार स्ट	ांद्रश्री विकास उन अस्य विकास	Neme of State	4.56			F. C. J. F. 783	anional least	<u> </u>	13
	S)	- 51k	I ML Brite.	ny ne nap (	(A) (1/3) migra	FUHIC	×	en ylini ser len Ladania mis	diene, ste Contra		1004 tenet	46	
į	<b>Y</b>	12224 L		April 2 to a feet			, s	12.5 14.5 14.5	, šels	ico res	Jeneth 1001	. 72	3
,	W.2	LLEVELA	NU conoci	? 'a e4 <b>.</b> 0H	10.4411				202.00	13, 13,	Tab - (1988 - 1887)		7
Į			Contract to	iss not at (	#3. > ช. กเ	JULLIL	LAND				TUNE PROPERTY		ENT OF
	WAGE	CK04534	व्यक्तिका व्यक्त	अवस्ति अ	Par vina an	g tr State	they of	Marian Property Sea Services Services Services Services	Programme Programme	600 a	Tarable mega		
į.	1	UNU4734		77 320	יי לככ ∪		This informati	Copy C for emitted to	ployee's rec	cords	1 610 10 6162		8
ه.	11	S INFORMAT	ION DETU	DV FOR		1 (3) (4) 1 .	2 - 2 - 2 - 2	in the state of th	Traverso,	BAU BOA		ND reserves	
•	•	S. INFORMAT				TYEAR	1983		1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CLAIN	ANT'S COL	PΥ	
	-1	ILROAD UNE		NI INSUE	HANCE	. University	H5	٠.					: :
	1	T PAYMENTS		1983	<b>&gt;</b>	\$ SLOTT	875.0	)					; ;
•	1.3	SUPERATOR A	S THEMY( OV OT OU	Me Orion	LGADRUIA Liegopo	អ ១ភា អង្គ	ଆଧା ଧତ୍	0. 9%9.8	TI-BY-W	HOM:	MEOGIA	JP.	) T
	Yo	NETURN)	AT ELE	Chimava:	5055 BND. 5054 BND.	ичовы в У ИО ОЗТ	FAX IS SOSSEDE	5 COL	ROAD R	ETIREM	NT BOARD	Mr.	1
:	W	HOM? THU	12224	MLE LORAIN	I.AVE		*	844 RUSH	STREET	10-11	TUA-T 51(1)[\$	10.3.	1
•		IOW CIPCI	CLEVEL	AND OH	4411		នាក់ខ្ញុំ ។ ១៤១៣	CHICAGO	. ILLINO!	S, 60611,	DERAL LA	39	•
:		ID	i E	المجار المسار	ng a sa Tarang.	-		30-210343	<b>.</b>		ŘENTS 10		!
	"	HILLY SHON	PACE CHAR	PUOT:	TUORA, IA	ogađajio Ovješe si	AT DE	200 <del>0 988</del>	0:1A 8	M904 3	CONE TA	A)	
	ľ.		260_7	2-400b	-	virknigs (1):	1 100 (42)				TREQUES :	0	
•	Kin		10 m			. \	.	FOR IMPOR	HANT INF	ORMATIC	)N		
	ر: ٠٠٠٠		BOCINE S	HT NO.	1	· \	ſ					: I,	

For the year .	January I-De	cember 3	1, 1983	or other tax year b	eginning		100	. endin			<del>(3) .</del> (3)		B No. 1
Use				jaint return, also gi		me and initial)		s, engin ast nan			Property	58 2 3 5	urity n
IRS label			CHR	IST & BE	TTY J.	STEIM	LF				4		Ī
Other- wise,	Present ho	me addres		ber and street, incli			ual route)			************	Sp	ouse's socia	secur
please	City town	or part off	122	24 LORAI	N AVE.	·	·····				Ŀ		i_
print or type.	0.17, 10.111	ui post oil		VELAND,	DH 441	11			us occubați		lros	d Con	duc
Presidenti	al	) Do		ant \$1 to go to				130				hon (I	
Election Ca		P Hj	oint re	lurn, does you	r spouse w	ant \$1 to go	to this fund	,  -	Yes Yes		No No	not	increa educe j
· · · · · · · · · · · · · · · · · · ·	•	1		Single								n Act Notice	
Filing Sta	atus	2	X	Married filing	joint return (	even if only on	e had income	)		• •		·	
Check onty	• •	3		Married liling s	eparate return	. Enter spouse':	s social security	no. abi	ove and fu	It name he	re		
one box.		4		Head of house	hold (with q	ualifying persi	on). (See page	6 of Ir	nstruction	ns.) If the	qualityin	ng person is	your
	•	5	-	cmid but not y	our depende	nt, write child	's name here.				· · ·		
1			X	Qualifying wid	owier) with (			e died	▶ 19	). (See	page 6 o	f Instruction	<u> </u>
Exemptio		р.	X	Yourself Spouse		1 -1	rover		:	Blind		boxes ch	ected
Always che			irst nan	nes of your depe	ndent childra		rover	DMA!	5 -	Blind DANIE		J on Salam Enter nu	
the box labe				. ,			707 JUU 7 11					of childre listed on	0
Yourself. Check other		<b>d</b> O		pendents: ) Name	(2)	Relationship	(3) Number of months lived		dependent		one-half of	1,2150 811	v
boxes if the apply.	у _			,			in your home		0 or more?	dependent	's support?	Enter nur of other	mber
	-				<del> </del> -		<del> </del>	ļ				dependen	
	-	e T	otal nur	mber of exemptic	ns claimed			<u> </u>				Add aum entered i	
				The transfer of the transfer of		· • • • • • • •	<u></u>	• • •	· · · · ·	· · · · ·		<ul> <li>boxes abo</li> </ul>	ove 🕨
. [													
come		7 W	ages, s	alaries, tips, etc.								7 17,	064
come	•	7 W 8 In 9a D	lages, s iterest i ividends	alaries, tips, etc. income (also atta s (also attach Sch	 ch Schedule edule B if ove	B if over \$400 or \$400)	Oor you have a	ny All-	Savers in				
tome	Delf	7 W 8 In 9a Di ¢ Si	lages, s iterest i ividends ubtract	alaries, tips, etc. income ( <i>also atta</i> s ( <i>also attach Sch</i> line 9b from line	ch Schedule edule B if ove 9a and ente	B if over \$400 or \$400)	O or you have a	ny All- , <b>9</b> b E	Savers in	l		7 17,	064
come	our W-2G,	7 W 8 In 9a D c Si 10 R	lages, s iterest i ividends ubtract elunds iter an	alaries, tips, etc. income (also atta s (also attach Sch- line 9b from line of State and loc- amount unless	ch Schedule edule B if ove 9a and enter at income ta	B if over \$400 er \$400)	Our you have a	ny All- , 9b E e 10 o	Savers in		not s	7 17, B 1,	064
ase attac Apy B of yours W-2, of W-2P h	our W-2G, ere.	7 W 8 In 9a D c Si 10 R	lages, s iterest i ividends ubtract elunds iter an structio	alaries, tips, etc. income (also atta s (also attach Sch- line 9b from line of State and loc amount unless ons)	ch Schedule edule B if ove 9a and enter at income ta you deduc	B if over \$400 er \$400) r the result ass, from wor ted those tax	O or you have a	ny All. , 9b E e 10 o lier ye	Savers in aclusion of Instruc ar—see		not of 10	7 17, B 1,	064
ase attac Apy B of yourms W-2, d W-2P h	our W-2G, ere.	7 W 8 In 9a D c Si 10 R er In	lages, s iterest i ividends ubtract elunds iter an structio imony r	alaries, tips, etc. income (also atta s (also attach Sch line 9b from line of State and loc amount unless ons)	ch Schedule edule B if ove 9a and enter at income ta you deduc	B if over \$400 er \$400) If the result ares, from wor ted those 120	O or you have a	ony All- , 9b E e 10 o	Savers in actusion of Instruc ar—see	tions (do page 10	not of 10	7 17, B 1,	174
ase attac Apy B of yourms W-2, of W-2P his	our W-2G, ere. t have	7 W 8 In 9a D c Si 10 R er In 11 AI	lages, s iterest i ividends ubtract elunds iter an structic imony r usiness	alaries, tips, etc. income (also attas s (also attach Sch- line 9b from line of State and loc amount unless ons) received income or (loss)	ch Schedule edule B if ove 9a and ente al income ta you deduc (attach Sche	B if over \$400 er \$400)	O or you have a	e 10 o	Savers in aclusion of Instruc ar—see	tions (do page 10	not   10   11   12	7 17, B 1,	174
ase attac ase attac by B of yourms W-2, d W-2P hill you do not W-2, see	our W-2G, ere. t have	7 W 8 In 9a D c Si 10 Ri er In 11 Ai 12 Bi 13 Ca	lages, s ividends ubtract elunds of an elunds of an elunds of an elunds an elunds of an elunds of elunds of an elunds of elunds of  alaries, tips, etc. income (also atta s (also attach Sch- line 9b from line of State and loc amount unless ons) received income or (loss) ain or (loss) (atta	ch Schedule edule B if ove 9a and enter al income tar you deduct (attach Sche ch Schedule	B if over \$400 or \$400)r the result	O or you have a	e 10 o	Savers in actusion of Instruc	tions (do page 10	not   10   11   12   13   13	7 17, B 1, 9e	174	
ase attac ase attac by B of yourms W-2, d W-2P hill you do not W-2, see	our W-2G, ere. t have	7 W 8 In 9a D c Si 10 Rer In 11 Ai 12 Bi 13 C: 14 40 15 Su	lages, s iterest i ividends ubtract elunds iter an structic imony i usiness apital ga 19% capi	alaries, tips, etc. income (also atta s (also attach Sch- line 9b from line of State and loc amount unless ons) received income or (loss) ain or (loss) (atta ital gains or (los	ch Schedule edule B if ove 9a and ente al income ta: you deduc: (attach Sche ch Schedule ions not repo	B if over \$400)  If the result  I ses, from wor  I ted those tax  Edule C)  D)  I ted on line I.  Form 4797)	Our you have a	e 10 o	Savers in xclusion of Instructions	tions (do page 10	not of 10 11 12 13 14 15	7 17, B 1,	174
tome  lase attac A by B of yourns W.2, d W-2P his you do not W-2, see Uge 5 of structions	our W-2G, ere. t have	7 W 8 In 9a D c Si 10 R er In 11 Ai 12 Bi 13 Ci 14 40 15 Su 16 Fu	lages, s iterest i ividends ubtract elunds inter an structio imony r usiness apital ga 2% capi uppleme	alaries, tips, etc. income (also atta s (also attach Sch- line 9b from line of State and loc amount unless ons) received income or (loss) ain or (loss) (atta ital gains or (los oble pensions, IR)	ch Schedule edule B if ove 9a and enter al income tar you deduct (attach Sche ch Schedule ions not repo sses) (attach A distribution	B if over \$400 ar \$400)	Sor you have a	e 10 o	Savers in xclusion of Instructions of Instructions	tions (do page 10	not of 10 11 12 13 14 15	7 17, B 1,	174
tome  lase attac A by B of yourns W.2, d W-2P his you do not W-2, see Uge 5 of structions	our W-2G, ere. t have	7 W 8 In 9a D c Si 10 Ri 21 Ai 12 Bi 13 C: 14 40 15 Su 16 Fu 17a Ot	lages, s iterest i ividends ubtract elunds inter an istructio imony r usiness apital ga ippleme ippleme ifly taxa ther per	alaries, tips, etc. income (also atta s (also attach Sch- line 9b from line of State and loc amount unless ons) received income or (loss) ain or (loss) (atta ital gain distribut ental gains or (los ible pensions, IR)	ch Schedule edule B if ove 9a and enter al income tar i you deduct (attach Schedule ions not repo sses) (attach A distribution ties, includin	B if over \$400 ar \$400)	Sor you have a least on pages in an ear.  3 (See page 10 less not reporte tal received	e 10 of ins	Savers in aclusion of Instructions tructions	tions (do page 10	100   100   110	7 17,8 1,900	174
tome  lase attac A by B of yourns W.2, d W-2P his you do not W-2, see Uge 5 of structions	our W-2G, ere. t have	7 W 8 In 9a D c Si 10 Ri 11 Ai 12 Bi 13 C: 14 40 15 Su 16 Fu 17a Ot b Ta	lages, s iterest i ividends ubtract elunds inter an structic imony i usiness apital ga y capi uppleme ifly taxa ther per ixable a	alaries, tips, etc. income (also atta s (also attach Sch- line 9b from line of State and loc amount unless ons) received income or (loss) ain or (loss) (atta ital gain distribut ental gains or (los ible pensions, IR) nsions and annui amount, if any, fro	ch Schedule edule B if ove 9a and enter al income tar i you deduct (attach Schedule ions not repo sses) (attach A distribution ties, includin tom workshee	B if over \$400 ar \$400)	Skheet on pages in an ear.  3 (See page 10 ies not reported tal received of Instructions	e 10 o lier ye	Savers in xclusion of Instructions tructions	tions (do page 10	10   10   11   12   13   14   15   16   17   17   17   17   17   17   17	7 17,8 1,900	174
tome  lase attac A by B of yourns W.2, d W-2P his you do not W-2, see Uge 5 of structions	our W-2G, ere. t have	7 W 8 In 9a D c Si 10 R 11 Al 12 Bi 13 C: 14 40 15 Su 16 Fu 17a Ot b Ta 18 Re	lages, s iterest i ividends ubtract elunds iter an istructio imony i usiness apital ga ippleme ifly taxa ther per ixable a ents, ro	alaries, tips, etc. income (also atta s (also attach Sch- line 9b from line of State and loc amount unless ons) received income or (loss) ain or (loss) (atta ital gain distribut ental gains or (los bble pensions, IR) nsions and annui umount, if any, fri yalties, partnersh	ch Schedule edule B if ove 9a and enter al income tar i you deduc (attach Schedule ions not repo sses) (attach distribution ties, includin om workshee sips, estates,	B if over \$400 ar \$400)	ksheet on pag les in an ear.  3 (See page 10 les not reporte that received of Instructions	e 10 o lier ye	Savers in xclusion of Instructions tructions	tions (do page 10	10   10   11   12   13   14   15   16   17   17   17   17   17   17   17	7 17,8 1,90c	174
ase attac A fay B of ye yems W-2, d W-2P h You do not W-2, see ge 5 of structions	our W-2G, ere. t have	7 W 8 Im 9a D c Si 10 Rer In 11 AI 12 Bi 13 C: 14 46 15 Su 16 Fu 17a Ot b Ta 18 Re 19 Fa	lages, so terest i ividends ubtract elunds of terest in	alaries, tips, etc. income (also attas s (also attach Sch line 9b from line of State and loc amount unless ons) received income or (loss) ain or (loss) (atta ital gain distribut ental gain distribut ental gains or (los oble pensions, IR nsions and annui impount, if any, fr yalties, partners) ome or (loss) (a	ch Schedule edule B if ove 9a and enter al income ta: you deduc (attach Schedule ions not repo isses) (attach A distribution ties, includin om workshee nips, estates, ittach Schedule	B if over \$400) If the result area, from wor ted those tan edule C) D) From 4797) Is, and annuiti g rollovers. To et an page 10 of trusts, etc. (a table F)	ksheet on pages in an ear.  3 (See page 1) ies not reported tal received of Instructions	e 10 of lins donling 17a	Savers in xclusion of Instructions tructions	tions (do page 10	5   10   10   11   12   13   14   15   16   17   18   19   19   19   19   19   19   19	7 17,8 1,90c	174
ase attach check	our W-2G, ere. t have	7 W 8 Im 9a D c Si 10 Rev In 11 Ai 12 Bi 13 C: 14 40 15 Si 16 Fu 17a Oi b Ta 18 Re 19 Fa 20a Ur b Ta	lages, siterest i ividends ubtract ichter an inches	alaries, tips, etc. income (also attas s (also attach Sch line 9b from line of State and loc. amount unless ons) received income or (loss) (atta- attal gain distribute ental gain distribute ental gains or (los- tible pensions, IRA insions and annui- inmount, if any, fre- yalties, partnersh ome or (loss) (a yment compensa mount, if any, fre-	ch Schedule edule B if ove 9a and enter al income ta: you deduc (attach Sche ch Schedule ions not repo isses) (attach A distribution im workshee nips, estates, attach Sched dition (insuran om workshee	B if over \$400 er \$400) I the result was, from wor ted those tax edule C) D) wited on line 1: Form 4797) is, and annuiti g rollovers. To et on page 10 of trusts, etc. (a hule F) ince). Total receit on page 11 of	ksheet on pages in an ear.  3 (See page 10 ies not reported that received 11 ies received 15 instructions	9b E e 10 of Ins of Ins tonline 17a	Savers in actusion of Instructions of the 17	iions (do page 10	5   10   10   11   12   13   14   15   16   17   18   19   19   19   19   19   19   19	7 17, 8 1, 9c (	115
tome  Tase attack A py B of years W-2, A W-2P hill you do not Years bot ge 5 of structions	our W-2G, ere. t have	7 W 8 Im 9a D c Si 10 Rev In 11 Ai 12 Bi 13 C: 115 Si 16 Fi 17a Oi 17a Oi 18 Re 19 Fa 20a Ur b Ta 21 Oi 0	lages, s terest i vidende ubtract e leurds selves s	alaries, tips, etc. income (also atta s (also attach Sch line 9b from line of State and loc. amount unless ons) received income or (loss) ain or (loss) (atta ain distribut ental gains or (los tible pensions, IR/ nsions and annui ornount, if any, fro youtes, partners) ome or (loss) (at gyment compenss) (a gyment compenss) (a gyment compenss) (a gyment spathers) ome (state nature a	ch Schedule edule B if ove 9a and ente al income ta: you deduc (attach Sche ch Schedule ions not repo sses) (attach A distribution om workshee nips, estales, intach Sched dion (insuran om workshee	B if over \$400 er \$400) r the result on the result of the	ksheet on pages in an ear.  3 (See page 10 ies not reported that received 11 ies received 15 instructions	9b E e 10 of Ins of Ins tonline 17a	Savers in actusion of Instructions of the 17	iions (do page 10	not of 10 11 12 13 14 15 16 18 19 10 20	7 17, B 1, Doc (	174
ase attack and py B of years W-2, and W-2, see Be 5 of structions	our W-2G, ere. t have	7 W 8 Im 9a D c Si 10 Revin 11 Ai 12 Bi 14 40 15 Si 16 Fu 17a Oi 18 Re 20a U a 20a U a 21 Oi E	lages, s terest i vidends vidends bitract class between struction immony of the capital capita	alaries, tips, etc. income (also atta s (also attach Sch line 9b from line of State and loc. amount unless ons) received income or (loss) ain or (loss) (atta dital gain distribut ental gains or (los oble pensions, IRI assions and annui simount, if any, fri youties, partners) oome or (loss) (a ayment compensa mount, if any, fri oome (state nature a	ch Schedule edule B if ove 9a and ente al income ta: you deduc (attach Sche ch Schedule ions not repo sses) (attach A distribution lies, includin am workshee nith schedule ion (insurae and switce—see and switce—see 33,33	B if over \$400) If the result less, from wor ted those tax edule C) D) Interest to the second of the second on line 1: Form 4797) Is, and annuiting rollovers. To et on page 10 of trusts, etc. (a hule F) Interest to page 11 of institution of the second of	ksheet on page tes in an ear.  3 (See page 10 ies not reporte tal received of Instructions this interest.)	9b E e 10 of Ins of Ins tonline 17a	Savers in actusion of Instructions of the 17	tions (do page 10	S	7 17, 8 1, 9c (	115 476 547
ase attack and py B of years W-2, and W-2, see Be 5 of structions	our W-2G, ere. t have	7 W 8 Im 9a D c Si 10 Rer In 11 Ai 12 Bi 13 C: 14 40 15 Si 16 Fu 17a Ot b Ta 18 Re 19 Fa 20a Ur b Ta 21 Ot E 22 To	lages, s terest i i vidends ubtract i i i i i i i i i i i i i i i i i i i	alaries, tips, etc. income (also attas s (also attach Sch line 9b from line of State and loc amount unless ons) received income or (loss) ain or (loss) (atta- aital gain distribute ental gains or (los- toble pensions, IR nsions and annui amount, if any, fre yalties, partnerst ome or (loss) (a yment compensa mount, if any, fre ome (state nature a utor Foe ome, Add amoun	ch Schedule edule B if ove 9a and enter al income ta: you deduc (attach Schedule ions not repo isses) (attach A distribution inies, includin ion workshee inips, estates, attach Sched idion (insuran ion workshee ind swice—see ind swice—see ind soirce—see	B if over \$400 er \$400) I the result ages, from wor ted those tan those tan those tan those tan ted those tan ted those tan ted on line 1. Form 4797) Is, and annuiti g rollovers. To et on page 10 of trusts, etc. (a tule F) Ince). Total receit on page 11 of linstrict 17 • 00 I for lines 7 thr	ksheet on pages in an ear.  3 (See page 10 is sometimes in an ear.  3 (See page 10 is sometimes in an ear.  3 (See page 10 is sometimes in an ear.  3 (See page 10 is sometimes in an ear.  4 (See page 10 is sometimes in an ear.  4 (See page 10 is sometimes in an ear.  5 (See page 10 is sometimes in an ear.  6 (See page 10 is sometimes in an ear.  7 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  8 (See page 10 is sometimes in an ear.  9 (See page 10 is sometimes in an ear.  9 (See page 10 is sometimes in an ear.  9 (See page 10 is sometimes in an ear.  9 (See page 10 is sometimes in an ear.  9 (See page 10 is sometimes in an ear.  9 (See page 10 is sometimes in an ear.  9 (See page 10 is sometimes in an ear.  9 (See page 10 is sometimes in an ear.  9 (See page 10 is sometimes in an ear.  9 (See page 10 is	ny All- , 9b E e 10 of los of los donlin 17a   20a	Savers in actusion of Instructions of the 17	tions (do page 10	not of 10 11 12 13 14 15 16 18 19 10 20	7 17, 8 1, 9c (	115 476 547
ase attack A py B of years W-2, d W-2P h  you do not W-2, see tige 5 of structions	w.2G, ere. t have	7 W 8 Im 9a D c Si 10 Rer In 11 AI 12 Bi 13 C: 14 40 15 Si 16 Fu 17a Oi b Ta 18 Re 19 Fa 20a Ui b Ta 21 Oi 22 To 23 Me	lages, s terest i i vidends de la vividends de la vidends	alaries, tips, etc. income (also atta s (also attach Sch line 9b from line of State and loc. amount unless ons) received income or (loss) (atta aital gain distribut ental gains or (los tible pensions, IR, ssions and annui mount, if any, fri yalties, partnerst ome or (loss) (a gyment compensa mount, if any, fri ome (state nature a utor Foe ome, Add amoun spense (attach Fo	ch Schedule edule B if ove 9a and enter al income ta: you deduc  (attach Sche ch Schedule ions not repo sses) (attach A distribution ins workshee nips, estales, ittach Sched idion (insuran om workshee ad swirce—see 3 3 3 3 ts in column	B if over \$400 or \$400) If the result the second	ksheet on page 10 (See page 10 ies not reporte ital received 11 instructions itach Schedul eived 11 instructions intions)	9b E e 10 of Ins of Ins tonline 17a	Savers in actusion of Instructions of the 17	tions (do page 10	S	7 17, 8 1, 9c (	115 476 547
ase attack A py B of ye ye ms W-2, d W-2P h ou do not y-2, see ge 5 of structions  Hease her money order here.	w.2G, ere. t have	7 W 8 Im 9a D c Si 10 Rer In 11 AI 12 Bi 13 C: 15 Su 16 Fu 17a Ot 18 Re 19 Fa 20a Ur b Ta 21 Ot 22 To 23 Me 24 En	lages, s terest i vidends vide	alaries, tips, etc. income (also atta s (also attach Sch line 9b from line of State and loc. amount unless ons) received income or (loss) ain or (loss) (atta ain distribut ental gains or (los oble pensions, IR/ assions and annui amount, if any, fr yalties, partners) ome or (loss) (a yment compensa mount, if any, fr ome (state nature a thor Fee ome, Add amoun spense (attach For business expense	ch Schedule edule B if ove 9a and ente al income ta: you deduc  (attach Sche ch Schedule ions not repo sses) (attach A distribution thes, includin tom workshee this setales, intach Sched thion (insuran tom workshee this setales, intach Sched thion (insuran tom workshee this setales, intach Sched thion (insuran tom workshee this setales,	B if over \$400 et \$400) or the result of the	ksheet on page 10 (See page 10 ies not reporte stal received of Instructions attach Schedul eived of Instructions attachs)	ny All- , 9b E e 10 o e 10 o of ins o of ins d on lir 17a [	Savers in xclusion xclusion of Instructions tructions are 17.	tions (do page 10	not of 10 11 12 13 14 15 16 18 19 10 20 21 12 22	7 17, 8 1, 9c (	115 476 547
lase attack A py B of year ms W-2, A w-2p h you do not W-2p see Uge 5 of structions  I diustmet I income See	w.2G, ere. t have	7 W 8 Im 9a D c Si 10 Rer In 11 AI 12 Bi 13 Ci 14 40 15 Si 16 Fu 17a Oi b Ta 18 Re 19 Fa 20a Ur b Ta 21 Oi 22 To 23 Me 24 En 25a IR b En	lages, s terest i vidends ubtract elunds elu	alaries, tips, etc. income (also atta s (also attach Sch line 9b from line of State and loc. amount unless ons) received income or (loss) (atta ait gain distribut ental gains or (los bible pensions, IR/ assions and annui amount, if any, fr yalties, partnersl ome or (loss) (a yment compensa mount, if any, fr ome (state nature a yment compensa mount, if any, f ome (state nature a yment compensa mount, if any, f ome (state nature a yment compensa mount, i	ch Schedule edule B if ove 9a and enter al income ta: you deduc  (attach Sche ch Schedule ions not repo sees) (attach A distribution ties, includin tim workshee nips, estates, ittach Sched tion (insuran tim workshee and switce—see 183,33 ts in column town 3903 or ties (attach Fo orksheet on p	B if over \$400 et \$400) or the result are re	ksheet on page 10 (See page 10 ies not reporte stal received of Instructions actions)	ny All-, 9b E e 10 o e 10 o o lier ye do nlir 17a   20a   23   24	Savers in xclusion xclusion of Instructions tructions are 17.	tions (do page 10	not of 10 11 12 13 14 15 16 18 19 10 20 21 12 22	7 17, 8 1, 9c (	115 476 547
ase attack A py B of years W-2, A w-2P h  ou do not W-2, see The see T	w.2G, ere. t have	7 W 8 Im 9a D c Si 10 Rer In 11 AI 12 Bi 13 C: 14 40 15 Si 16 Fu 17a Oi b Ta 18 Re 19 Fa 20a Ur b Ta 21 Oi 22 To 23 Me 24 En 25a IR b En	lages, s terest i vidends ubtract elunds elu	alaries, tips, etc. income (also atta s (also attach Sch line 9b from line of State and loc. amount unless ons) received income or (loss) (atta ain or (loss) (atta ain distribut ental gains or (los tible pensions, IR/ assions and annui amount, if any, fr yalties, partners) ome or (loss) (a yment compensa mount, if any, fr ome (state nature a utor Fro ome, Add amoun spense (attach Fo business expens ction, from the w e IRA payments y bove	ch Schedule edule B if ove 9a and ente al income ta: you deduc  (attach Sche ch Schedule ions not repo sses) (attach A distribution ties, includin ties, inc	B if over \$400 et \$400) or the result of the	ksheet on page 10 (See page 10 ) (Se	23 24 25a	Savers in xclusion xclusion of Instructions tructions are 17.	tions (do page 10	not of 10 11 12 13 14 15 16 18 19 10 20 21 12 22	7 17, 8 1, 9c (	115 476 547
rase attach A day B of ye by B of	w.2G, ere. t have	7 W 8 Im 9a D c Si 10 Rer In 11 AI 12 Bi 13 C: 15 Su 16 Fu 17a Oi 18 Re 19 Fa 20a Ur b Ta 21 Oi 22 To 23 Me 24 En 25a IR/ b En lim 26 Pa	lages, s terest i vidends vide	alaries, tips, etc. income (also atta s (also attach Sch line 9b from line of State and loc. amount unless ons) received income or (loss) ain or (loss) (atta ain distribut ental gains or (los tible pensions, IR/ assions and annui amount, if any, fro yalties, partners) ome or (loss) (a tyment compensa mount, if any, fro ome (state nature a tyment compensa mount, if any, fro ome (state nature a tyment compensa income (state nature a tyment compensa mount, if any, fro ome (state nature a tyment compensa income (state nature a tyment compensa income (attach for business expensa ition, from the will e IRA payments y bove	ch Schedule edule B if ove 9a and ente al income ta: you deduc  (attach Schedule ions not repo ions includin ions workshee inips, includin ion workshee ion worksh	B if over \$400 et \$400) or the result ares, from wor ted those tax edule C)  D) overed on line I. Form 4797) as, and annuiting rollovers. To et on page 10 of trusts, etc. (a hule F) or the page 11 of instead on lines 7 through 17 of 10 or lines 7 through 17 of 10 or lines 7 through 1903F) or m 2106) page 12 dent plan	ksheet on page 10 (See page 10 ) (Se	23 24 25a	Savers in xclusion xclusion of Instructions tructions are 17.	tions (do page 10	not of 10 11 12 13 14 15 16 18 19 10 20 21 12 22	7 17, 8 1, 9c (	115 476 547
ase attack A py B of years W-2, A w-2P h  ou do not W-2, see The see T	w.2G, ere. t have	7 W 8 Im 9a D c Si 10 Rer In 11 AI 12 Bi 13 C: 15 Su 16 Fu 175 OI 18 Re 19 Fa 20a Ur b Ta 21 Oi 22 To 23 Me 24 En 25a IR b En lim 26 Pa 27 Pei	lages, s terest i vidends vidends blract elter an structio imony i usiness applica capi i poplema a her per vixable a her inco	alaries, tips, etc. income (also atta s (also attach Sch line 9b from line of State and loc. amount unless ons) ircceived income or (loss) ain or (loss) (atta diat gain distribut ental gains or (los oble pensions, IR nsions and annui ormount, if any, fre ome or (loss) (a yment compensa mount, if any, fre ome (state nature a tome or (loss) (a yment compensa mount, if any, fre ome (state nature a tome (stat	ch Schedule edule B if ove 9a and ente al income ta: you deduc  (attach Schedule ions not repo sses) (attach A distribution ion workshee inips, includin ion workshee inips at setales, intach Sched dition (insuran ion workshee in \$3,33 its in column ion workshee ion wo	B if over \$400 et \$400) or the result less, from wor ted those tax edule C)  D) overed on line 1: Form 4797) et on page 10 of trusts, etc. (a hole F) et on page 11 of listing 17 of 10 listing 19 of 10 listing 1	ksheet on page 10 (See page 10 )  ies not reported of Instructions (Itach Schedul eived of Instructions (Itach Schedul eived of Instructions (Itach Schedul eived of Instructions)	23 24 25a 26 27	Savers in xclusion xclusion of Instructions tructions are 17.	tions (do page 10	not of 10 11 12 13 14 15 16 18 19 10 20 21 12 22	7 17, 8 1, 9c (	115 476 547
ase attack A py B of years W-2, A w-2P h  ou do not W-2, see The see T	w.2G, ere. t have	7 W 8 Im 9a D c Si 10 Rer In 11 AI 12 Bi 13 C: 15 Su 16 Fu 175 Ot 18 Re 19 Fa 20a Ur b Ta 21 Ot 22 To 23 Me 24 En 25a IR b En lim 26 Pa 27 Pei 28 Alii	lages, s terest i vidends vide	alaries, tips, etc. income (also atta s (also attach Sch line 9b from line of State and loc. amount unless ons) received income or (loss) ain or (loss) (atta ain distribut ental gains or (los tible pensions, IR/ assions and annui amount, if any, fro yalties, partners) ome or (loss) (a tyment compensa mount, if any, fro ome (state nature a tyment compensa mount, if any, fro ome (state nature a tyment compensa income (state nature a tyment compensa mount, if any, fro ome (state nature a tyment compensa income (state nature a tyment compensa income (attach for business expensa ition, from the will e IRA payments y bove	ch Schedule edule B if ove 9a and ente al income ta: you deduc  (attach Schedule ions not repo sses) (attach A distribution lies, includin iom workshee nips, estales, ittach Sched ittach	B if over \$400 et \$400) r the result less, from wor ted those tax edule C)  D) which on line I. Form 4797) is, and annuiting rollovers. To et on page 10 of those to page 11 of those to page 11 of linits 17 • 00 for lines 7 thr.  3903F) corm 2106) page 12 et of page 11 of linits 17 • 00 for lines 7 thr.	ksheet on page 10 (See page 10 )  3 (See page 10 )  ies not reported of Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Instructions (Itach Schedul post Itach	23 24 25a	Savers in xclusion xclusion of Instructions tructions are 17.	tions (do page 10	not of 10 11 12 13 14 15 16 18 19 10 20 21 12 22	7 17, 8 1, 9c (	115 476 547

4 1 Control Rumber		◆2 Employer's state number	FOR OFFICIAL USE ORLY
3 Employer's Name, Address, and 709 Cide	and the second		MODIFICE (O. C.)
CONSOLIDATED HAIL CORP	ORATION  B Advance EIC payment	B Employer's Identification .	ai trooms vis
PHILA: PA. 19104	1111/11/11/11/11/11/11/11/11/11/11/11/1	23-1989084	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
B Employee's Social Security No. 7 B Federal Income Ton 28 Ban 22-4006 1668 a	79	Other Comp 5556 + 50	mirence includes at power in the control of the con
13 Employee's Hume First, Middle, Land Co. SIEI MLE	Warne of State UH10	<ul> <li>Compression of the control of the cont</li></ul>	7 m. 20 7. 1 6
1) Employer's Address and 20 Cook.	1 - y B	The man of the man of the second	13556.5
CLEVELAND OH 4	54111 Harpe pl Spote	Land City	Tan withhold
Andre alternation of the second	VELVE		of early to \$181
CR051584 629895 3200	5 <b>30</b>	बार्लेक्ट्रेबिक्स क्रिकेट हो। इस सर्वे १५ १८ - १ क्रिकेट व्यक्तिक क्रिकेट कर्	1111/21/18
PK027284 974822 2500 7	, , , , , , , , , , , , , , , , , , , ,	Copy C for employ that bridged to the l	/Be'S records AS and appropriate State officials.
U.S. INFORMATION RETURN FOR CA			AMERICAD RETIREMENT BOARD (FORM O-1999UC (1379)  CLAIMANT'S COPY
RAILROAD UNEMPLOYMENT INSURA		1987	
ACT PAYMENTS IN 1982	<b>▶</b> \$ <sup>300</sup>	2125.00	il Ex
URSENIALOYMENT INSUBERICE ACT	0A0/5.5/65 381 F		BAS MHOM, BAID 3 1940S
serie paid to you. As shown	28 generalisa	SHIT MAT SMOOM DAR	AD RETIREMENT BOARD
TO MANGE XAT SWOOM JAHRI C STEIMLE	usa inan ko de	# 844 RUSH S	
WHOM SUCIEZZA LURAIN			
CLEVELAND DH	44111	3.38VF 38   161 141 165 165 165 165 165 165 165 165 165 16	REVERTS TO THE INTERN
DUDNE YAT BABY TA SHOULD	Voės whistr		WOOME TAX FOSIAS ON
		-แรงสงอก <i>มากสา</i> กเก็ 3	CK OF THIS FORM
288-22-4006	• • •		INT INFORMATION
Social Accients			
Social Accients		FOR IMPORTA	ANT INFORMATION
Sociale Security ACCOUNT NO.  Control State ID. —ROMBER BURGER  2 Engloying a name, address, and 202 code		FOR IMPORTA	and Tax Statemani DMB No. 1505 C008  200 C For employee's records  activities for the plant allows seen
Contraction State ID.  Contraction State ID.		FOR IMPORTA	and Tax Statemant DMB No. 1505 0009  oby C For employee's records  resident data for any opening the pro-
Control State ID.  Control State	71 <b>7</b> (1) 3(5)	FOR IMPORTA  FOR IMPORTA  FOR IMPORTA  WE THE THE THE THE THE THE THE THE THE TH	and Tax Statemani OMB No. 1555 0008  oby 0
Contraction of the property of	TIVIII 399 RUSTEE	FOR IMPORTA  FOR IMPORTA  FOR IMPORTA  WE THE THE THE THE THE THE THE THE THE TH	and Tax Statemani OMB No. 1555 CODS 200 C Ear employee's records ending that I have you make the season that the season in the factor is the season that the season in the factor is the season that the season in the factor is the season that the season is the season in the season in the season in the season in the season is the season in
Contra SECURITY ACCOUNT NO.  Contra State ID.  C	TIVIII 399 RUSTEE	FOR IMPORTA  FRAM 1982: W422  DEMPOYALE INVESTIGATION CONTROL TO Wages, they control resident	and Tax Statemani DMS No. 1505 0003 DDy C For employee's records Controlled to the promotion of the promotio
School Security  Control State ID  REMIER State ID  REMIER STATE  LEGISTER STA	TIVIII 399 RUSTEE	FOR IMPORTA  FIRM 1982  Sempoyata leorification number  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and Tax Statemani DMS No. 1555 0003 2039 C For embryore's records The stateman in malitaneous transfer of the stateman in mali
Control State ID.  Control State ID.  Control State ID.  HOMBER State ID.  LENGTH IN THE TANK AND THE STATE ID.  LENGTH IN THE TANK AND	TIVIII 399 RUSTEE	FOR IMPORTA  FRAM 1982: W422  DEMPOYALE INVESTIGATION CONTROL TO Wages, they control resident	and Tax Statemani DMS No. 1505 0003 DDy C For employee's records Controlled to the promotion of the promotio
Control Scounty ACCOUNT NO.  Control State ID.  REMIEN State ID.  REMIEN STATE ID.	TIVIII 399 RUSTEE	FOR IMPORTA  FIRM 1982  Sempoyata leorification number  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and Tex Statement DMB No. 1555 0003 2009 C For embryore's records The statement in median hard The stat
Control State ID.  Control State ID.  Control State ID.  HOMBER State ID.  LENGTH IN THE TANK AND THE STATE ID.  LENGTH IN THE TANK AND	TIVIII 399 RUSTEE	Demployers to the compensation of the compensa	and Tex Statement DMB No. 1855 0003 DDV C For embryore's records The Artificial Text of the Text of th
Const SECURITY ACCOUNT NO.  Const State ID.  Const State	TIVIII 399 RUSTEE	FOR IMPORTA  FRAM 1982: W432  Semptoyet 3 tool pick abon number  2 7 8 6 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	and Tax Statemant SMS No. 1505 COSS DOY OF For Embryoles' Coccess The Process in malitary and the Process in th
Con a SECURITY ACCOUNT NO.  Con a Stan ID.  MOMENT STAN ID.  LENGTH IN PACTOR  LENGTH IN PACTOR  LENGTH IN PACTOR  LENGTH IN PACTOR  LENGTH IN PACTOR  BERREYM SACREFOCUTTY MEMBER  BERREYM SA	TIVIII 399 RUSTEE	FOR IMPORTA  FRAM 1982: W432  Semptoyet 3 tool pick abon number  2 7 8 6 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	and Tex Statement DNB No. 1885 0003 DDV C For embryole's records DDV C For
Conne SECURIT ACCOUNT NO.  Conne State ID.  Conne State ID.  RESIDENT State ID.  RESIDENT STATE	TIVIII 399 RUSTEE	JEMPORTA  JEMPONES, Identification number  JEMPONES, Identification number  JUNES  JEMPONES, Identification number  JUNES	and Tax Statement DMS No. 1505 0003  20 y C For cmologoes records  continued for the year of the statement  The continued for the year of the statement  The continued for the year of the statement  The continued for the year of the statement  The continued for the
Conne Security ACCOUNT NO.  Conne State ID.  Conne State	TIVIII 399 RUSTEE	FOR IMPORTA  FRAM 1982: W412  Semptoyeta lotoripicalión numbe  2 7 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	and tax Statemant SWS No. 1555 COSS  DOV C For Consequent Costs  The process and the costs and the costs  The process and the costs and the costs  The process and the cost
Control Step ID.  Control State ID.  Control State ID.  RESPECTIVE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE  GEN	TIVIII 399 RUSTEE	FOR IMPORTA  FRIM 1982: W/422  Semptoyet, it for ripe bids number  2 7 3 10 100 100 100 100 100 100 100 100 10	and Test Statement DMS No. 1555 C005  20 y C
Control Step ID.  Control State ID.  Control State ID.  RESPECTIVE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE BANK  GENERAL STATE  GEN	TIVITY 1999 BUSTEE	FOR IMPORTA  FRAM ( ) 1982: W4312  Semptoyet a low-ripe abon number  2 7 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	and Tax Statemant DMS No. 1505 C003 DOY OF PART CONTROL OF THE CON
Control Step ID.  Control State ID.  Control State ID.  RECOUNTY ACCOUNT NOTICE STATE ID.  Exployer's name, address, and ZP control  C. S. L. L. V. L. B. ANTX  G. G. V. C. C. D.  Exployer's special poculty humber. S Februal in State C. F. A. L.  Exployer's party in the C. C. C. C. C. C. C. C. C. C. C. C. C.	TIVER (1)	FOR IMPORTA  FRAM ( ) 1982 W4312  Semployed a floring a bid number  2 7 8	Sind Teas Statement DMS No. 1555 C005  Sind Teas Statement DMS No. 1555 C005  Day Co. Fat consequence Consequence  The Consequence Consequence  Statement Co. Statement Co. Statement  Statement Co. Statement Co. Statement  Description  Statement Co. Statement Co. Statement  Description  Statement Co. Statement Co. Statement  Description  Statement Co. Statement Co. Statement  Description  Statement Co. Statement Co. Statement  Description  Statement Co. Statement Co. Statement  Description  Statement Co. Statement  Description  Statement Co. Statement  Description  Description  Statement Co. Statement  Description  Description  Statement Co. Statement  Description  Descript
Control Scounty ACCOUNT NO. State ID.  Control State ID.  REMONER BROWNER  2 Employer's name, address, and ZP control  CARSALL - VIV PACOVO  TREE STRUE BANK  TREE STRUE BANK	TIVER (1)	FOR IMPORTA  FRAM ( ) 1982 W4312  Semptoyed a flooring a bifu number  2 7 8 0 10 10 10 10 10 10 10 10 10 10 10 10 1	and Tex Statement DMS No. 1555 0003  Day C. For employee's receipts  Participation in the control of the contro
Control Step ID.  Control Step ID.  RECOUNT NO. 10.  Control Step ID.  RECOUNT NO. 10.  LENGTH A NAME AND ARCHIVE TO THE CONTROL OF PARCIDING TO THE CONTROL OF PARCIDING TO THE CONTROL OF PARCIDING TO THE CONTROL OF	TIVITY ASS	FOR IMPORTA  FAIR 1982  SEMPOYALL INVESTIGATION NUMBER  1 10 Wages, this, other compensation  10 Wages, this, other compensation  11 12 State Journal Inv. 10 State wag  12 State Journal Inv. 10 State wag  13 FICA wages  15 12 State Journal Inv. 10 State wag  16 12 State Journal Inv. 10 State wag  17 12 12 12 12 12 12 12 12 12 12 12 12 12	and Tax Statement DMS No. 1555 C003 DDV C For employees receipts The face appropriate to the part of t

For the year	lanuary 1-D	ecember 31, 1981, or	other tax ye	ar beginning	, 198	I, ending	, 19 . OM	B No. 1545-0074	_
Use ; Ye	i fint name a	nd leitlet (if joint return,	node eugli atte	se's name and in	tial)	Lost name	ong it distribution in Pro-	ur social security n	וחש
IRS label.	agent home and	Christ		ty J. 5					
Other-	ADD-18 800		Lorair		Poral (outs)	rianji iri	Sp	ouse's social securit	y no
please Ci	, town or post	office, State and ZIP cod		i nya.	night no both	Your or	ccupation >p_	1 road Cond	1.00
or type.		Clevel	and, [	DH 44111			's occupation	ce Shop Ope	371
Presidential Election Cam		You want \$1 to go				<u>Y</u> e	- 1/////	Note: Checking "Ye not increase your tax	3" * OF
\$.5 ·		oint return, does yo	ur spouse	want \$1 to g			s //// X   No   c	duce your refund. on Act Notice, see Instr	.:
Filing Sta	, I - I.	1.	ng joint rei	urn (even if o			विद्राद सम्बद्धाः प्रतान करण		
Check only	12 ]	Married filing	separate re	turn. Enter spoi	oso's social secu	irily no, above ar	nd full name here 🗲		
: 2 73	ัชรูป จะส่ว			vith qualifying	g person). (Se	e page 6 of lastre	octions.) If he or she	s is your unmarried	l ch
- 4:67	5	enter child Qualifying		with depende	nt child (Yea	spouse died )	▶ 19 ): (See of	ge 6 of instructions.)	-:-
Exemption	60	X Yourself		or airel 1	65 or over)		Blind (2) 191	); Enter pumber of	į
Always check	dala S	X Spouse			65 or over 2		Blind #1 32	boxes checked to be on 6a and b	[2
the box label Yourself.	nd 17 35 6	First names of your	dependent	t children who	lived with yo	"►Thom	as branch	Enter number :: of children	2
Check other boxes if they	. d	Other dependents:			(3)-Number of	(4) Did dependent	[ 3 (5) Did you provide	) viisted on 6c	7.5
apply.		(1) Name		(2) Relationship	in your home	have income of \$1,000 or more?	more than one-helf of dependent's support?	Enter number of other	ĺ
							18869853	s dependents Add numbers	L
4 1.37	•	Total number of e	xemptions	claimed		ा हालानास हो। विकास	Committee of the Chang	entered in boxes above ben	١.
	Control - NUMBER	强带 进事 四	<b>克勒斯</b>	VALUE AZ			:UE >	7 22.838	٦
ra jame, addie		JA DA BER		TOP TO		Mage and Tax St spy C — For emotoys	alement	* *	4
MA -	utu	delactivity	18	D4 272	lion jumber	Common proceed are to me the contract.  Since one worker to be one contract.	Aretrae Smesse	V Sty	12
10X 57	L	s a profit for	S cy br	5 State on the State of State	Paris Labor 12 M2	And the Assessment	Signal Control of the		r!n
A 4.15	c 0211	<b>等是选择</b>	38.3	0, 0,				s =0- "	15.2
CAN CANADA	35 00 1 20	<i>विदेशी</i> स्वास्त्रह	الندخ	Light Line	7.60	ance EIC payment	940 32	All the Silling I	· ·
	<b>学期</b>	<b>阿斯斯斯斯斯斯斯斯</b>		P.Weit Wild	er compensation	II SCA UX altina	37 3 12 2 37 36 110 110		-
a marine, edicire	and lift code	9 (-9)	100	33	5.11				-)
			1977	D FILES PRINTS	0.00	14 HCATING	Charge of 1		
V LURAI	MARKET SALES	late in	*******	16 (95-167)-1-1-1-1	65.783		20001210211	_[	<del></del>
司家特别			7-17	estaba ta e	ale high year de	4-74-6	1 × 1		:
town and to			3 3 3 3	O. O.	10 State -april	0.00		A 12	
	<b>PARTY</b>	tilePon/Serve	15-52-6	O Local Pitodia trans	M Religion proper	Distant is a zillan	5 16 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		÷
Jan, D	A (AA)	Trickly by 18 average		1.16.0.0.	16 (2)		<b>▶</b> 1	<u> </u>	
	3.7	Barrier and the second	76	· · · · · ·	tres de la contraction de	3500510065	F ** 200 750 4 1 1/////	ZA - 5	5
7 2 4 1 5 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1	* 79.9	◆ 1 Control Number	n in indicated the second seco	Critical Control	2 Emplayer's stat	o number	FOR OFFICIAL USE	ONLY	<u>.</u>
# Employacy ه کا CONS		D RAIL CORP	TRATIO	N 3	Tellion.	70% XXX	(कान्य १ जार स्टब्स्ट्र् इत्यास १ जोर्र सीवर्ष	,	·** >
RM 207	16 NORTH	32ND STREET	9 Advence EIC		neloyer a Identificati	. البلبي	ากการเลาได้เกิดตั้งกรีส์	Maria State	
7.		的特殊。	14-12-1	기:	23-1989	084	30 10 10 10 10 10 10 10 10 10 10 10 10 10	Site Division	:
(B Employee's S	del Security Ma	D Federal Docume Test V	Althous 10	Wages, Tips, Other	900 P. 1995	ension Plan Coveres	i i surance inclu	Term Life in. Go	
13 Employee's	=4 UU6	3001.	OII No	ne of State or City	13.051	NO	Ten Withhold	PLANE Z	)
<u> </u>	EIMLE.		1:0	rin sterijaa <b>)H [U</b>	१ भारता हाल्या हु। 	Different tigant.	。 中央 中国主新教育	92.05	
Protein profes	12 1 20 8	en aver de las	1-20 J		Pi⊒kara Medika di Pika efita ditanga	erina angalangan Pangangan	Taxable wage		17.
112824:	LORAIN	12 OIL 4	, Hor	ne of State or City :	3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	135 in		503.UJF	
CLEAF	เรียกใช้แล้ว - เปล่าของสิ่ง	Bernalder Bernalder	1110	LEVFI AN	D CLTY	in more exist.	i brigge	1007	-
		1 1000 at 1500 1						100 100 T 5	

Present home ad	idress (Number and	hrist & Siret Including a 2224 Lo.	Betty .	os rurel reute)	S <b>teiml</b> e	st name		Your social s	ecurity no	ımbė
City, tewn or po	idress (Number and	2224 LO	partment number.	or rure) reute)	- <del> </del>					
al D	ot office, State and C	ZIP code		) <b>,</b>				Spouse's soci	al security	no.
		Tenereue	d, Ohio	44111		Your occupat		1ke Sho		
	o you want \$1				1	Yes	X No	Note: Check not Increas	ing "Yes e your t	" wi
by reau for	State City,	live (actual loc e page 2 of Instr village, boroug	ation of   B D uctions.)   li th, etc.	o you live with mits of a city, v	in the legal	C in what co			refund. what to you live	
tatus I	X Single Marri Marrie Head	ed filing joint d filing separate of household	return (even i e return Enter s	f only one hi	ad income) security no. a	bove and full n	ame here		44	. [
5	130		r) with deper	7	······	e died ▶ 19				
ons b	17-1			7			Blind Blind	boxes ch	recked nd b	2
	First names	of your depen	dent children	who lived wi	th you ▶			Enter nu	mber	2
	- S Control Nu	uper		←2 Employe	r's state number	· FOR	OFFICIAL	USE ONLY		=
Z-4006 or's Name First, Mi TETPL = or's Address and Zi LCR ATC	Z I.	. 6.85 	Plane of State or	94.07		_	Burenes (1)	tratuded in Bea 10	by John John John John John John John John	er r
•	1895_3ZU	¥ذ5 أن		a. b. filada	ish amploye	e's State, Cin employer's co	2 (	037 % 07	DEPARTMENT O	to
VIII.	State 1.0	Pal			Wage	and Tax Stat		19	·t	
TAELT E	and the		PEN	ING Pages	ber depriese	et the foreign (Mitte Bay I et a pitch in Ener (et in 45 and experience Sine et Mitte (12 and 12 and 13 and 14 and	Pur Secret	20b 21	-0-	
74.				9101				22   20	, 559_	-
4006 nt address, and 21 41. 6	Pcode	ne iai wilhidy 49.86	13.804	245.3 Vages	2	PCA flois	GC Cu	1	. 500	-
							of State	10	059	_
	Italius 2 3 4 4 5 0008 6 ck beled NSOLIDA 215, 16 NOM	Italius  I Single Marrie Marrie Head name S Quali Marrie Head Name S Quali Marrie Head Name S Quali Marrie Head Name S Quali Marrie Head Name S Quali Marrie	Single    X   Married filing joint	Single  Married filing separate return. Enter s  Head of household. (See page 6  name  Qualifying widow(er) with deper  Qualifying widow(er) with deper  Spouse  Ck  C First names of your dependent children  41 Control Number  NSOLIDATED RAIL CORPORATION  215, 16 NORTH 32ND STREET  A, PA 19104  Social Security Nn  27-400/6  LCK A111 A  LANO  GIIL TILL  Rame of State of  LI FIL  TO Address and 210 Code  LCK A111 A  LANO  GIIL TILL  Name of State of  LI VEL 7  State of  LANO  GIIL TILL  Name of State of  LI VEL 7  STATE OF	Single   2   Married filing joint return (even if only one his married filing separate return. Enter spouse's social   Head of household. (See page 6 of instructions name   Qualifying widow(er) with dependent child (  65 or oven the last of the	Single  Married filing joint return (even if only one had income)  Married filing separate return. Enter spouse's social security no. a  Head of household. (See page 6 of Instructions.) If qualify name  Qualifying widow(er) with dependent child (Year spous 65 or over 65 or o	Single    Single   Married filing separate return (even if only one had income)   Married filing separate return. Enter spouse's social security no, above and full in	Single    Single	Italius   1	Single   Far INS use of   Far INS use

U.S. INFORMATION RETURN FOR CALLINDAR YEAR RAILROAD UNEMPLOYMENT INSURANCE	1979	CLAIMANT'S COPY
ACT PAYMENTS IN 1979 > \$	50.00	The second of th
		BY WHOM PAID
TO C STEINLE WHOM 12224 LORAIN AV CLEVELAND DH 44111		U. S. RAILROAD RETIREMENT BOARD 844 RUSH STREET CHICAGO, ILLINOIS 60611
PAID		36-2165433
288-22-4006	٠.	READ THE BACK OF THIS FORM FOR IMPORTANT INFORMATION

For Privacy Act No	tice, see page 3 of	Instructions	For the yea	lamaty )-Deci	rober 31, 1979, er	ether tex yes	u beginning	, 19	19, ending		19
Use Your I	first name and initial	(if joint return,	also give spe	i bas eman s'esu	· · · ·		name	Į Ye	our social secu	rity nu	mb
label		rist &				imle	<u> </u>			<u>:                                    </u>	
Other- Preser	nt home address (Hum)			-	tural routa)		( ) or the Million of the Control of	Sŧ	ouse's social	securit	y no
niense		224 Lo		VB.	<u></u>	<del></del>	<del> </del>			<u> </u>	
print city.	town or post office, Sta						Your occupation	ı ▶ R	R Condd	Cto	<u> </u>
	<u> </u>	evelen	d, Uhi	0 4411	L.I.	1.3	spouse's occup		ke Shop		
Presidential Election	Do you wa	ent \$1 to go	to this fur	nd?		,	t Yes	No.	ote: Checkin	~	
Campaign Fund	If joint ret	um, does y	our spouse	e want \$1 to	go to this fund	d7	Yes		educe your r	•	
	1,11	Single					Yana				
Filing Status	-	Single Married fills	na láint rat	him (mon if	only one had i	neeme) .					
Check only	-			-	et sbonse,s social	-	Imbar akaun an				
one box.	-				Instructions,) If						 L::
. 1		name >	ousenoiu, (	(Sea haka 1 at	instructions,) ii	dnamani	R heison is )	our unmar	nea cillo, e	nter ci	nuo
		, ,,,,	widow(er)	with depend	ent child (Yea	r spouse o	died ▶ 19	). (See i	page 7 of Instri	ections.	}
T	63 X	Yourself			. 65 or over ·			Blind ···	Enter numb		
Exemptions	b X	Spouse	: .		65 or over			Blind	boxes chec		2
Always check	e First na	mes of you	r depender	nt children w	ho lived with y	· · · · · · · · · · · · · · · · · · ·			Enter numt		
the box labeled Yourself.				ъ					af children listed		2
Check ather		dependents:		1	(3) Number of		ondent (5) Di	you provide	<b>1</b>		
boxes if they apply.		(1) Nome		(2) Relationsh	in your home	\$1,000 or		an one-half of int's support?	Enter numb	er	Γ
4				· I .					dependents		
		<del></del>							Add numbe	<u>"</u> .	Γ.
	7 Total o	umbar of a						1.	Add numbe	<u>.</u>	A
	1	izot Humber	Mana		≠7 Employer's ste	nte number	<b>ГОЯ С</b>	FFICIAL US		<u></u>	4
2 February 100	- 1 Cont	4				nte number	<b>ГОЯ О</b>	FFICIAL US	E ONLY	1	4
1	→ 1 Cont Address, and Ep Code	arof Number	ORATIO	DN J			<b>ГОЯ О</b>	FFICIAL US	E ONLY	1	4
CONSO	- 1 Cont	AIL CORP	ORATIO	N	Employer's Identifica	Vold I	FOR C	FFICIAL US	E ONLY	1	4
CONSO RM 215, 1 PHILA., PA	Address and to Code LIDATED RA 5 NORTH 32ND	AIL CORP	6 Advance Et	N C payment 6	Employer's Identifica Humber 23-198	11ien 9084			E ONLY	6	A
CONSO RM 215, 1 PHILA., PA	Address, and Top Code LIDATED RA 5 NORTH 32ND 19104 Security No. 9 FM	AIL CORP STREET	6 Advance El	N IC payment 6	Employer's Identification Number 23-198	your	Coverage? Yee/N	of Cost of Group	P Term Life In-	116	4
CONSO RM 215, 1 PHILA, PA B Employee's Sodal 2 R 8-22-4	Address, and Zip Code LIDATED RA 5 NORTH 32ND: 19104 Security No.   9 Feb.	AIL CORP	6 Advance Et Withheld 10	ON IC payment 6  O Woges, Tips, Oth 141	Employer's Identification Number 23-198:	11ien 9084	Coverage? Yee/N	o Cost of Grov surance Inch	P Term Life In-	116	A
CONSO RM 215, 1 PHILA., PA B Employee's Social 2 R 8-2 2-4 1 32 Employee's Name	Address, and Ep Code LIDATED RA 5 NORTH 32ND: 19104 Security No. 9 Fee 006	AIL CORP STREET	Withheld 10	ON K payment 6  O Wages, Tips, Oth  1 4 1	Employer's Identification Number 23-198:	your	Coverage? Yee/N	o Cost of Grovesurance Inde	P Term Life In-	116	4
CONSO RM 215, 1 PHILA., PA B Employee's Social 2 R 8-2 2-4 1 32 Employee's Name	Address, and Exp Code LIDATED RA 5 NORTH 32ND: 19104 Security No. 8 Fee 006 9 First, Middle, Lart)	AIL CORP STREET  der if Income Tea	Withheld 10	ON IC payment 6  O Woges, Tips, Oth 141	Employer's Identification Number 23-198:	your	Coverage? Yee/N	o Cost of Ground surance Inch.  Yan withheld  Taxable wag.	p Torm Life in-	1 6 1	-
CONSO RM 215, 1 PHILA., PA B Employee's Social 2 R 8-2 2-4 1 13 Employee's Name	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 8 For 006 p First, Middin, Lant) MLF.	AIL CORP STREET  der if Income Tea	Withheld 10	ON K payment 6  O Wages, Tips, Oth  1 4 1	Employer's Identification Number 23-198:	your	Coverage? Yee/N	o Cost of Ground surance Inch.  Yan withheld  Taxable wag.	p form Life included in Box 10	1 6 1	4
CONSO RM 215, 1 PHILA., PA B Employee's Social 2 R 8-2 2-4 1 13 Employee's Name	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 8 For 006 p First, Middin, Lant MLF Trace and Exp Code TRAIN A	AIL CORP STREET  der if Income Tea	Withhild 10	O Wages, Tips, Ori	Employer's Identification Humber 23-198:	your	Coverage? Yee/N	o Cost of Grovesurance Inch.  Tax withheld  15  Taxable wags  14)	p Term Life in- used in Box 10  3 • 62	16	-
CONSO RM 215, 1 PHILA., PA B Employee's Social 2 R 8-2 2-4 1 13 Employee's Name	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 8 For 006 p First, Middin, Lant MLF Trace and Exp Code TRAIN A	AIL CORP STREET dor at Income Ta	Withhild 10	O Woges, Tips, Oth  1 4 1 3  Jama of State or Cit	Employer's Identification Humber 23-198:	your	Coverage? Yee/N	o Cost of Grovesurance Inch.  Tax withheld  15  Taxable wags  14)	e Torm Life in- coded in Box 10  3 • 62  30 • 62	16	42
CONSO RM 215, 1 PHILA., PA B Employee's Social 2 R 8-2 2-4 1 13 Employee's Name	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 8 For 006 p First, Middin, Lant MLF Trace and Exp Code TRAIN A	AIL CORP STREET dor at Income Ta	Withhite 11 79 N F	O Wages, Tips, Ori	Employer's Identification Humber 23-198:	your	Coverage? Yee/N	o Cost of Grousurance inch Tax withheld 15 Taxable way 141 Tax withheld	e Torm Life in- coded in Box 10  3 • 62  30 • 62	16	-
CONSO RM 215, 1 PHILA. PA B Employee's Social 2 R 8-22-4 13 Employee's Nam C STE1 37 Employee's Add 12224 LT CLEVELAR	Address and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 8 For 006 9 First, Mildelle Lant (MLE Trace and Exp Code 1) RAIN A	AL CORP STREET der it hooms Ta 1591	Withhold 10	O Wages, Tips, Ori	Employer's Identification Humber 23-198:	your	Coverage? Yes/N	o Cost of Grousurance inch Tax withheld 15 Taxable way 141 Tax withheld	p Term Life in Joseph 10 3 • 62 30 • 62 204 • 73	16	
CONSO RM 215, 1 PHILA. PA B Employee's Social 2 R 8-22-4 13 Employee's Nam C STE1 37 Employee's Add 12224 LT CLEVELAR	Address and Exp Code LIDATED RA 5 NORTH 32ND: 19104 Security No. 9 For 006 p First, Middle, Last) (MLF) Trace and Exp Code JRAIN A	AL CORP STREET double become Tax 1591.	Withhite 11 79 N F	O Wages, Tips, Oth  1413 James of State or Cri  1417 Jenne of State or Cri  LFVEL AF	Employer's Identification in the Internation in the	9084 A Pension Plan PAC	Coverage? Yea/?	Cost of Grove surance inch.  Tax withheld  15  Taxable way.  141  Tax withheld  2  Taxable way.  141	e Torm Life in- coded in Box 10  3 • 62  30 • 62	16	
CONSO RM 215, 1 PHILA. PA B Employee's Social 2 R 8-22-4 13 Employee's Nam C STE1 37 Employee's Add 12224 LT CLEVELAR	Address and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 8 For 006 9 First, Mildelle Lant (MLE Trace and Exp Code 1) RAIN A	AIL CORP STREET  durit income Tai  1591.	Withhold 10 79 N 179 O Wages, Tips, Ort  1 4 1 3 James of State or Cri LEFVEL A	Employer's Identification in Property of State Comp.  23-198:  19	your plan 19084 In Pension Plan 1946 In Control of the pla	Dyce's record	Cost of Groupstance Inch Tan withhold Tan withhold Tan withhold Tan withhold Tan withhold Tan withhold Tan withhold Tan being to the control of the control	2 form Life included in Box 10 3 . 62 30 . 62 30 . 62	1 G		
CONSO RM 215, 1 PHILA. PA B Employee's Social 2 R 8-22-4 13 Employee's Nam C STE1 37 Employee's Add 12224 LT CLEVELAR	Address, and Zip Code LIDATED RA 5 NORTH 32ND 19104 Security No. 9 Fee 006 9 Firm, Mildelle, Lani) (MLE Tosse and Zip Code 1) RAIN A ND 8 629895	atrol Number  AIL CORP STREET  devil Income Tax  1.591.	O Advision his	O Wages, Tips, Orth 1413 Isona of State or Cri. LFVEL AF	Employer's Identification in the Internation in Int	Holen 9084  Fension Plan P4(  for emplo g bunbhed to the	Dyce's record	Cost of Grove surance inch.  Tax withheld  15  Taxable way.  141  Tax withheld  2  Taxable way.  141	2 form Life included in Box 10 3 . 62 30 . 62 30 . 62	16	
CONSO RM 215, 1 PHILA. PA B Employee's Social 2 R 8-22-4 13 Employee's Nam C STE1 37 Employee's Add 12224 LT CLEVELAR	Address, and Zip Code LIDATED RA 5 NORTH 32ND 19104 Security No. 9 Fee 006 9 Firm, Mildelle, Lani) (MLE Tosse and Zip Code 1) RAIN A ND 8 629895	atrol Number  AIL CORP STREET  devil Income Tax  1.591.	O Advision his	O Wages, Tips, Orth 1413 Isona of State or Cri. LFVEL AF	Employer's Identification in Property of State Comp.  23-198:  19	Holen 9084  Fension Plan P4(  for emplo g bunbhed to the	Dyce's record	Cost of Groupstance Inch Tan withhold Tan withhold Tan withhold Tan withhold Tan withhold Tan withhold Tan withhold Tan being to the control of the control	2 form Life included in Box 10 3 . 62 30 . 62 30 . 62	1 G	
CONSO RM 215, 1 PHILA. PA B Employee's Social 2 R 8-22-4 13 Employee's Nam C STE1 17 Employee's Add 12224 LT CLEVELAR	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 9 Fee 0006  • First, Middle, Lavi)  [MLF  These and Exp Code 1) RAIN A ND  8 629895  • CCOUNT 21 Other In	arol Number  AIL CORP STREET  der it Income Tax 1591.	GANNICA III	O Woges, Tips, Orb  [4]:  Some of State or Cri  H [1]  Some of State or Cri  FVEL AT	Employer's Identification of Part of P	John Market of the Control of the Co	Coverage) Yea/N	Cost of Grove strance inch.  Tax withheld  15  Texable way. 141  Tax withheld  Tax withheld  Tax withheld  2  Texable way. 141	9 lerm Lille In Joseph 10 10 10 10 10 10 10 10 10 10 10 10 10	A GALLANDER OF THE PROPERTY AND A GALLANDER OF THE PROPERTY AN	
CONSO RM 215, 1 PHILA. PA B Employee's Social 2 R 8-22-4 13 Employee's Nam C STE1 17 Employee's Add 12224 LT CLEVELAN	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 9 Fee 0006  • First, Middle, Lavi)  [MLF  These and Exp Code 1) RAIN A ND  8 629895  • CCOUNT 21 Other In	arol Number  AIL CORP STREET  der it Income Tax 1591.	GANNICA III	O Woges, Tips, Orb  [4]:  Some of State or Cri  H [1]  Some of State or Cri  FVEL AT	Employer's Identification in the Internation in Int	John Market of the Control of the Co	Coverage) Yea/N	Cost of Group strange inch  Tan withheld  15  Totalle way  141  Tan withheld  2  Tenable way  141  S Sure officials	9 lerm Lille In Joseph 10 10 10 10 10 10 10 10 10 10 10 10 10	1 G	
CONSO RM 215, 1 PHILA. PA B Employee's Social 268-22-4 13 Employee's Nam C STE1 .17 Employee's Asso 12224 LF CLEVELAN CRO6862	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 9 Fee 006 FFITE, Middle, Lant) (MLE 1888 A 29895  MCCOUNT 21 Other Is	arol Number  AIL CORP STREET  deril Income Tax  1 1591 =  A  OH1 04	4111 N	O Woges, Tips, Orb  [4]:  Some of State or Cri  H [1]  Some of State or Cri  FVEL AT	Employer's Identification of the Internation of the Internation is being age 10 of Instructions in Internation	John 19084  Pension Plan Pil  Jor emple g bundand to the ructions .  itions)	Coverage) Yea/N	Cost of Grove surance inch.  Tax withheld  15  Taxable wag. 14)  Van withheld  Z  Taxable wag. 14)  S State officials.	p larm Life in Joseph 10 10 13 • 62 10	A GALLANDER OF THE PROPERTY AND A GALLANDER OF THE PROPERTY AN	
CONSO RM 215, 1 PHILA. PA B Employee's Social 28 8-22-4 13 Employee's Nam C STE1 17 Employee's Add 12ZZ4 LT CLEVELAR CR 06867	Address, and Exp Code LIDATED RA 5 NORTH 32ND: 19104 Security No. 9 Fee 006 FFIRE Middle, Levi) MLF. The and Exp Code 17 NA IN A ND  21 Other In 22 Total in 23 Moving	atrol Number  AIL CORP STREET  der it Income Tax  1591.  AIL CORP STREET  Ger it Income Tax  200 5  accome (state expense (a)	GANNICA III	O Woges, Tips, Orl  [4]:  learne of State or Cri  H]()  learne of State or Cri  LFVEL Af	Copy Composite in the control of the	intern 9084  Pension Plan P4( g hambled to the ructions . tions)   tions)   the 21	Coverage) Yea/N	Cost of Grove surance inch.  Tax withheld  15  Taxable wag. 14)  Van withheld  Z  Taxable wag. 14)  S State officials.	p larm Life in Joseph 10 10 13 • 62 10	A GALLANDER OF THE PROPERTY AND A GALLANDER OF THE PROPERTY AN	
CONSO RM 215, 1 PHILA. PA B Employee's Sodal 28 8-22-4 13 Employee's Nam C STE1 .17 Employee's Add 1 2 Z Z 4 L C C L EVELAN C C R 0 6 B 6 Z	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 9 Fee 006 FFIRE Middle, Levil (MLF. 19104  8 629895  ACCOUNT 21 Other In 23 Moving 24 Employe 25 Paymen	acol Number  AIL CORP STREET  der il Income Tax 1 591 a  1 591 a  2 0H1 04  3 2 00 5  accome (state expense (al expense (al expense (al expense tax on IR)	GANNING IN TO ANNUAL IN THE INTERIOR INTERIOR INTERIOR IN THE INTERIOR INTER	O Woges, Tips, Original of Column of State or Column for a 3903 or 39 (attach, Former 11 of Instri	Copy Copy Copy Copy Copy Copy Copy Copy	intern 9084  Pension Plan P4( g humbled to the ructions	Coverage) Yea/N	Cost of Grove surance inch.  Tax withheld  15  Taxable wag. 14)  Van withheld  Z  Taxable wag. 14)  S State officials.	p larm Life in Joseph 10 10 13 • 62 10	A GALLANDER OF THE PROPERTY AND A GALLANDER OF THE PROPERTY AN	
CONSO RM 215, 1 PHILA. PA B Employee's Social 28 8-22-4 13 Employee's Nam C STE1 17 Employee's Add 12ZZ4 LT CLEVELAR CR 06867	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104 Security No. 9 Fee 006 FFIRE Middles, Levil (MLF) RAIN A ND  21 Other In 23 Moving 24 Employe 25 Paymen 26 Paymen	acol Number  AIL CORP STREET  4591.  404104  3200 5  Accome (stata expense (ale expense (ale expense (ale to an IR) atts to a Keo	GANNING IN TO ANY IN THE STATE OF THE STATE	O Woges, Tips, Original Column of State or Critical Column for a 3903 or 39 (attach, Former 10) retirement	Copy Comp 14 Comp 15 Copy Comp 16 Copy Comp 16 Copy Comp 16 Copy Comp 16 Copy Copy Copy Copy Copy Copy Copy Copy	for employ hundred to the ractions.	Dyce's records the sad appropriate	Cost of Grove surance inch.  Tax withheld  15  Taxable wag. 14)  Van withheld  Z  Taxable wag. 14)  S State officials.	p larm Life in Joseph 10 10 13 • 62 10	A GALLANDER OF THE PROPERTY AND A GALLANDER OF THE PROPERTY AN	
CONSO RM 215, 1 PHILA. PA B Employee's Social 28 8-22-4 13 Employee's Nam C STE1 17 Employee's Add 12ZZ4 LT CLEVELAR CR 06867	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104  Security No. 9 Fee 006  FFIRE Middles, Levil (MLF) The man and Exp Code 17 Other In 22 Total in 23 Moving 24 Employe 25 Paymen 26 Paymen 27 Interest	and Number  AIL CORP STREET  4591.  404104  3200 5  Aucome (stata  come (stata  expense (al  exp	GANNING IN TO ANY IN THE STATE OF THE STATE	O Woges, Tips, Original Colores of State or Critical Colores of State or Critical Critical Colores of State or Critical	Copy Comp  Copy Copy  Copy Copy Copy  Copy Copy  Copy Copy Copy  Copy Copy Copy  Copy Copy Copy  Copy Copy Copy  Copy Copy Copy  Copy Copy Copy  Copy Copy Copy  Copy Copy Copy  Copy Copy Copy  Copy Copy Copy Copy  Copy Copy Copy Copy  Copy Copy Copy Copy Copy  Copy Copy Copy Copy Copy  Copy Copy Copy Copy Copy Copy Copy Copy	for emple purchase to the process of	Dyce's records the sad appropriate	Cost of Grove surance inch.  Tax withheld  15  Taxable wag. 14)  Van withheld  Z  Taxable wag. 14)  S State officials.	p larm Life in Joseph 10 10 13 • 62 10	A GALLANDER OF THE PROPERTY AND A GALLANDER OF THE PROPERTY AN	
CONSO RM 215, 1 PHILA. PA B Employee's Social 28 8-22-4 13 Employee's Nam C STE1 17 Employee's Add 12ZZ4 LT CLEVELAR CR 06867	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104  Security No. 9 Fee 006  FFIRE Middles, Levil (MLF) The mass and Exp Code 17 Other in 22 Total in 23 Moving 24 Employe 25 Paymen 26 Paymen 27 Interest 28 Alimony	and Number  AIL CORP STREET  4591.  40H104  3200 5  Accome (stata  come (stata  expense (al  exp	GANNING IN TO ANY IN THE PROPERTY OF THE PROPE	O Woges, Tips, Original of Column of State or Column for a 3903 or 39 (attach, Former 10) retirement of state of State or Column for a 3903 or 39 (attach, Former 11 of Instructions Instructions	Copy Comp  3-198:  Copy Comp  To CITY  Copy Comp  To City  To City  Copy Comp  To City  Copy Comp  To City  To	internal posts of the property	Dyce's records the sad appropriate	Cost of Grove surance inch.  Tax withheld  15  Taxable wag. 14)  Van withheld  Z  Taxable wag. 14)  S State officials.	p larm Life in Joseph 10 10 13 • 62 10	A GALLANDER OF THE PROPERTY AND A GALLANDER OF THE PROPERTY AN	
CONSO RM 215, 1 PHILA. PA B Employee's Social 28 8-22-4 13 Employee's Nam C STE1 17 Employee's Add 12ZZ4 LT CLEVELAR CR 06867	Address, and Exp Code LIDATED RA 5 NORTH 32ND 19104  Security No. 9 Fee 006  First Middlin Lant (MLF)  RAIN A HD  21 Other In 22 Total In 23 Moving 24 Employ 25 Paymen 26 Paymen 27 Interest 28 Alimony 29 Disabiliti	and Number  AIL CORP STREET  OH! 04  3200 5  Ocome. Add expense (a) ee business its to an IRV its to a Keo penalty on paid (see p	4111 No. 11 O Woger, Tipe, Ore  [4]:  O Woger, Tipe, Ore  [4]:  Isome of State or Cit  L F VEL Ar  Instructions  attach Form  Instructions  attach Form  attach Form	Copy Comp  3-198:  Copy Comp  To CITY  Copy Comp  To City  To City  Copy Comp  To City  Copy Comp  To City  To	for emple substitutions of the substitution of	Dyce's records the sad appropriate	Cost of Grove surance inch.  Tax withheld  15  Taxable wag. 14)  Van withheld  Z  Taxable wag. 14)  S State officials.	9 Term Life in Joseph 10 3.62 30.62 04.73	A GALLANDER OF THE PROPERTY AND A GALLANDER OF THE PROPERTY AN		

	For Privacy	Act Not	ice, see	page 3	of Instru	I Incom	the year	lanuary 1-	December 31.	1979, or old	er tax ye	at beginning		. 1978.	ending		. 19
į	IRS	Your fla	ST RAIDS	and Inii	taioi fil lai	return, also	Rive spapse	's name :	end Initial)		Last	name			r social s		
	label. Other-	Present	home ad	fress (N	umber and	etty .	J.		, or rural route	Steir	nle						
1	wise, please		122	224	Lora	in Av	ng opprinc	nt number	, or sural route	:)	•		: .	Spo	use's soci	ial secur	ity no.
ŀ	print	City, to	MIT OF DOS	t office,	State and I	IP tode					<del></del>			<u> </u>			
٠.	or type.		<u>C1</u>	eve.	land,	Ohio	4411	1							occupati 1ronc		nduc
	Do you	want \$1	to go to	the P	residentlat	Election Car	npaign Fu	nd? )	Yes ///	No	Note	: Checking	Yes will	-	se's occu		
			1	Spoo		l to go to th	is fund?	· ·   X	Yes ///	No	or n	Increase y educe your	refund.	Bic	ycle	Shop	o Op
	Filing St	atus	2	X	Single	t filiaa tat											
	Check only		1	1	Marrie	i filing sec	n return ar afars	ture if	if only one spouse is:	had incor	ne)					•	
			3		In the s	pace abov	e end e	nter fu	I name he	aiso mung re ▶	, give s	pouse's so	cial secu	irity nu	ımber	•	•
			5	$\vdash \dashv$	Cilliai	nea nead	OF HOUS	enold.	Enter ouali	fylna nan	10			٠٠٠٠٠٠٠٠		of Inster	ctions
	Fuenatio			<u> </u>	Quality	ing widow	(er) wit	deper	dent child	(Year sp	ouse d	ed 🕨 19	).	See pag	e 6 of In	struction	<u>s.</u>
	Exemptio		68	LX	Yourse	:11			65 or o					).			
	Always check the box labe		l	ΓŢ				ļ	י וייט פיט ו ר	ver 3 (, 3) (	if	. <del>[</del> ,8	lind .		Enter nur boxes chi		
لسويد	N	100	1 2 2 2	LAL	ontrol Num							FOR OFFIC				辯▶、	2
	3 Employer	Namě, A	ddress, en			<u>چند لت</u>		<del></del>	Sub	Cor-	vmber Vold	FOR OFFIC	WE DIE	DIVLY		e ar	
						ORPOR	ATION		Total	rection	r r				ا تعدونه	. ▶	2
			• ' • •	32NI	STREE	<b>T</b>		- : : : : : : : : : : : : : : : : : : :	Nimber	Identification					l	3	
		., PA.			g.'	To let al.		*:	2. Other Comp	3-198908			Towns.	<del></del>			
	288-2					2.92		'	t . 6 . 6 4	· 1	U4		Airance	Included	in Box 17		
	15 Employee			Ho, Last					CIN				Janveil	hheid	<del></del>	3	
	C S						CHI	C ::						136	.60	<u>}   ▶  </u>	۳
	19 Employee									0			Texable	45 C T	6.64	138 54	95
	12224 CLEVE				OHI	04411	Nume	of State or	City	· · ·			Ton with				
	10. 17.12				• • • • •				and (1					1.30	6.40		
1										).; ]-			Tamble				}
	CR070	402	6201		1200	<b>5</b> 30	-			·				362	E.64	: <u> </u>	
,		AND T				1978						BE'S FECOFÓ! Sand appropriate				91	36
ا م	Form.W-2					<del></del>	<del></del> -		DE	PARTMENT	OF THE T	REASURY-IN	TERNAL R		SERVICE.		
		- 1	16 N	et gai	n or (los	s) from Su	ppieme	ntal Sci	rted on Scho	dule D (see Sains and	page 9 c	I Instruction	s)··· -	15			
-	-	- 1	L	05585	(attach	Form 47	97)						] .	16			
	Please attach check		17 Ft 18 Pt	ally ta	xable pe	nsions an	d annul	ties no	reported	on Sched	υle Ε .		[	17			
	or money order here.		YO L	2112101	is, annu	ties, rents	. rovaltí	es, nari	inerships, 5) • • • • •								
		- 1	19 Fa	rm In	come or	(loss) (at	tach Sci	redula i	5/	• • • • •	• • • •	• • • • •	,	18			
		1	20 Ot	her ir	come (s	tate nature	and source	tsee	age 10 of h	nstructions)	<b>.</b>	• • • • •	-	9			
			•	:					***************************************			**********		10		- 1	
			21 To	tal in	come. A	ld lines A	g and	IOn the	rough 20 .		,			_ _			
Ad	justment								ough 20.		<del></del>	• • • • •	. <b>&gt;</b> 2		15,	684	95
	Income	2	23 En	ploye	e. busine	ss expens	ses (atta	ch For	m 2106) .	. 23							
	-		24 Pa	ymen	ts to an	RA (see pa	ge 10 of )	nstructio	ms)	24		1,798	70				
			5 Pag 6 Int	ymeni ere-i	s to a K	eogh (H.R	l. 10) re	tireme	nt plan	. 25							
_				mony	penalty paid (se	OUT TO E	arry Will Flostowa	ndrawai	of saving	s 26 27							
		2	8 10	al ad	ustment	s. Add lin	es 22 ti	rough	27				▶ 21			798 798	//// -
	ivsted	2	9 Sນໄ	tract	line 28	from line	21						25		13,6		<u>70</u> 25
Gra	oss incom	e   3	0 Dis 1 Adi	abiiity usted	income i enss i	exclusion	(attach	Form	2440)				30	~-I	-(		==
									want IRS						13 (	886	
		<u> </u>	٠,		- <110113 .								▶ 31		(	700[7	٤J

		I-December 3	), 1977, or other ta	able year beginnin	7		, 1977 ending			, 19
Ž	3 5		nrist & B				ast name		Your social secur	ity num
10	Proces	home address	Number and sheet.	ncluding aparlment	number, or rural route	26671117	e, Jr.		Spouse's social se	restitu m
2	ξ <sub>δ</sub>	17	2224 Lora	in Ave.			For Privacy Act No page 3 of Instruct		Spouse's social se	Curty M
Š	S Gills In		. State and ZIP code	01 1 11			Occu- Yours	!	lroad Cor	iduct
-	residential		levolend,	UN10 44	111			Bike	Stop Upe	rato
E	lection 👠	Do you wa	ent \$1 to go to	this fund?		l× l	es /////	No No	te: Checking '	Yes" w
	ampaign 🔽 und				to go to this fund	-	es	no	t increase your ce your refund.	
F	iling Statu	1	Single	<del></del>	- Bo to this fulfi	31 - 1 31	62//////////	No U		
	Check Only	2 X	Married filing	joint return (ex	en if only one ha	d income)	-			
	One Box		Married filing	separately. If	spoușe is also fil	ling, give s	DOUSE's social	security n	umber in the spa	ce abov
		3	ond enter spir	name nere	·					
L		5	Commanifed Me	80 of Househo	old. Enter qualifying ependent child (	Mamo -	5			nstruction
	xemptions		7			vear spous	e oleo > 19	). Se	e page 7 of Insi	iruction:
	ways check	6a X	Yourself		65 or or	ver		Blind	Enter number of	
مواليات	e "Yourself"		<u> </u>					5,,,,,	boxes checked on 6a and b	2
1	15-6-8391		·				W	age and T	ax Statement fi	977
				in the second	े व्यक्तिकार है। विकास के किस्तार के		Type or prin		Capy C For	
			ORPORATION :			the contract of	name addrei	4.5	employee's records	
	(UUM.215,~1	S NOHTH 32	POUSTREET, PH	LADELPHIA, F	A. 19104.		Federal :	100	His of the second of the secon	0:
Em	playes a social sec	unity	3 Federal Income to	m withheld	2 Wages, tips, salt diffee		humber		4 NOV 10 1	
38	88-22-	006		159.20	1138		inturance included in	bon? Larn g	Rejucasion included in b	
÷	2 11 2	a Employan's had	re, address, and ZIP cod	and the second						
	sie)	1141.2	:		Plane of State or City	STATE O	R CITY INCOME	TAX INFOR	Tab mithbald	
	2224 1	RAIN			OHIC			•	學 医自己 5-89	9.69
	LEVELAN			44111				1 N	Tanada 1 1 1 3 6 1	.07
	R069349		200		NCT OF FUEL GIV		\$ 7.7 \$ 7.8	3, 7, 9 <del>.</del>	r Takanin mini	\$
·	KUOYJ4Y	027	אָכ כעים	00 539	CLEVELANI	DELITY	1	THE ST	) i	3.61
:					5 (1) \$1	A Person	1	· hile	1 Tanabi 2 19361	07
For	m. W-2		·· · · · · · · · · · · · · · · · · · ·			<u> </u>			1.	. 1
M	14 Capita	gain or (	oss) fariant 90	neovie D)	rmished to the Intern			14	Trapping-Internal Reven	in Survice
_	15 50%	of capital g	ain distribution:	not reported	on Schedule D			10		-
	16 Net g	axable nen	) from Supplem	ental Schedule	of Gains and Lo	sses (attac	:h Form 4797)	16		
اوا	18 Pensic	ns, annuitie	es. rents. rovalti	es not report es nartnerchir	ed on Schedule E os, estates or trus		• • • • • • •	17		
Here	x y , a , , , ,	income or (	(1055) (artach S	:hedule F)				10		-
order P	ZV UINET	(21916 DAIN16	and source—see p	ike 9 of Instructi	APPL A			-		-
	0.01	reome, not	, iiiies 0, 9, and	IVC through a	20			- 21	11,837	- 27
Money	22 Movin	AVERDE O	attach Form 390	skip iines 27	2 through 27 ar		ero on line 28	い <b>      </b>		
5	23 Emplo	ree busines	s expenses (att:	13) Ich Form 2106		23				
	24 Payme	nts to an i	ndividual retirer	nent arrangen	ent (from at-					
Chack	tached	Form 5329	9. Part III)			24				
	25 Payme	nts to a Ke	ogh (H.R. 10)	etirement plai		25				
Attach	26 Forfeit 27 Ahmon	zu interest ; v paid feen	penalty for pren page 11 of Ins	rature withdra	wal	<del>26</del>		—  <i>      </i>		
Piease	28 Total a	djustments	. Add lines 22	tructions) Through 27 .	· · · · · · · · <u>· </u>	27				
£	29 i Subtra	t line 28 f	rom line 21					29	11,837	27
- 1			•	•	<b></b>					
- 1	30 Disabili	ty income	exclusion (sick	pay) (attach	Form 2440) e 29. Enter here	<i>.</i>	• • • • • • •	30	0-	

For the ve-	January 1-December			tamina			. 1976 endin			
Please	Nime (I) joint return, 2			nunng	)	Lost nar		-	Your so	clal security n
place label			Betty J.		Steimle					<u> </u>
on form .			et, including apartment no	mber, or ruit			acy Act Not	fication,	Spouse'	s social secur
Make all		12224 Lo	rain Ave. Place	tobal borr		see pag	ge 5 of Inst		L	
changes	City, town or post office	e, State and 21P	, coqs	SPORT MEIT		Occu-				1tchmen
on label.			d, Ohio 44111			pation				Operator
<u> </u>	Single		(Check only ONE b	' 1	6a Regular					
	<u> </u>		ven if only one had inco I spouse is also filing	eive	b First na		your dep <b>Thomas</b>		children anini	WILO
Status	spouse's social sec		in designated space a	bove E		you			Enter	er > 2
S 28	and enter full name here			xemptions	c Number	of other	depender	its (from		
Ē 4 [	Unmarried Head o	f Household.	See page 7 of instruc	lions 🖁	d Total (a	dd lines	6a, b, and	c) .		Foter
	you qualify 🕨				e Age 65 o	r older .	Yours	en 🗌	Spouse	number of boxes
5 [			dependent child () See page 7 of Instructi		f TOTAL					checked
-7 Other	dependents:	, , , , , , , , , , , , , , , , , , ,	(b) Relationship	<del>,</del>	the lived in your	<del> </del>	dapendent			for dependent's
	for Maria	San San		borne. I during yo	I born or died er, write B or D.	have inco or more?	ime of \$750	By YOU.	H 100%	By OTHERS
								\$	-,::::::::::::::::::::::::::::::::::::	\$
			L	1		<del></del>			: .	
<b>*</b>			FSAVIN	G S	ACCO	บพา	r.EA	RNI	NG	S
<b>S</b>	LAIFWE	.NIO	FSAVIII							
							Wage	and To	x Stater	ment 1976
									<b>-</b> -	
	· · · · · · · · · · · · · · · · · · ·					4	Type or pr	in) S		py C For
DENN CI	ENTRAL TRANSPO	RTATION C	OMPANY, DEBTOR			4	nome, odd	S ress.	empl	oyee's records
	•		OMPANY, DEBTOR 73-6000765	•		4	nome, odd ZIP code o Federal	S ress.	employee	oyee's records
	•		OMPANY, DEBTOR 73-6000765 PHILADELPHIA, PA.	•	* <u>.</u>		EMPLOYER name, add	S ress, and A v	empli var empliyee vy a qualified var. etc.?	oyee's records
-ROOM 2	•	nd STREET, F	23-0000000	19104	es, and other	l' See	EMPLOYER' nome, odd .ZIP code o Federal identifying	S ress, and A v	empli var empliyee vy a qualified var. etc.?	oyee's records
FOOM 2	15, 15 NORTH 32r	nd STREET, F	PHILADELPHIA, PA.	19104	2789.0	6	EMPLOYER nome, add ZiP code of Federal identifying number.	hod A y	empli Yas employee ye a quotied flore etc.?	oyee's records
Employee number 28	15, 15 NORTH 32r	1 Federal in	PHILADELPHIA, PA.  some lax withheld  279.03	2 Wopes 14 compession	2789.04 si	6	EMPLOYER name, add	hod A y	empli Vas semplyyses vy a quohisa ilon, sit 7	oyee's retords covered pension , NC usion included in burnament if applica
Employer number 28	15, 15 NORTH 32rd's social security  27-4006  s or print Employee's no	1 Federal in	PHILADELPHIA, PA.  some lax withheld  279.03	2 Wages, It competited	2789.04 State or City	6	EMPLOYER nome, add ZiP code of Federal identifying number.	Sress, and Av	empli Vas semplyyses vy a quohisa ilon, sit 7	oyee's records
Employer number 28	15, 15 NORTH 32cr 's social security 22-4006 or print Employee's no	1 Federal in	PHILADELPHIA, PA.  some lax withheld  279.03	2 Wopes 14 compession	2789.04 State or City	6	EMPLOYER nome, add ZiP code of Federal identifying number.	Sress, and Av	emply or a confidence of the c	oyee's records corped period period NO No No No No No No No No No No No No No
Employer number 28 - Type	15, 15 NORTH 32r 2's social security 22-4006 5 or print Employee's no	1 Federal in	PHILADELPHIA, PA.  come tax withheld  279 . US  and UP code below.	2 Wages, It competited	2789.04 State or City	6	EMPLOYER nome, add ZiP code of Federal identifying number.	Sress, and Av	empli ver employee y e quothed doe, etc. T. C. Raboto resimbu	oyee's records covered period period NC  Sinn included in be presented if application as withheld 20  Toroble wage 278
Employer number 28 - Type	15, 15 NORTH 32cr 's social security 22-4006 or print Employee's no	1 Federal in	PHILADELPHIA, PA.  come tax withheld  279.03  nd UP code below.	19104  2 Wopes II empessor  Name of OHIO	2789.04 State or City	6 FATE OR C	EMPLOYER nome, add ZiP code of Federal identifying number.	Sress, and Av	empl.  You sempley so quotied flow, etc. 1.  C Relector resemble REMATION	oyee's records corporal period period NC Nicon included in the reconsert if applicat  as withheld 2 (for oble wage 2 784  as withheld
Employer number 28 Type 122 CLEV	15, 15 NORTH 32r 22-4006 5 or print Employee's not STETHLE 4 LURAIN	1 Federal in	PHILADELPHIA, PA.  come tax withheld  279 . US  and UP code below.	19104  2 Wopes II empessor  Name of OHIO	2789.04 State or City	6 FATE OR C	EMPLOYER nome, odd ZIP code o Federal identifying number. al group form onne included i	Sress, and Av	employee property of the control of	oyee's records covered person. NC sinn included in be presented if application (as withhold 2( foxoble wage 2.78  2.78  2.78
Employer number 28 Type 122 CLEV	15, 15 NORTH 32rd's social security  22-4006  see print Employee's not stated.  4 LIRAIN  /ELAND	I Federal in	PHILADELPHIA, PA.  come tax withheld  279.03  nd UP code below.	19104  2 Wopes II empessor  Name of OHIO	2789.04 State or City	6 FATE OR C	EMPLOYER nome, add ZiP code of Federal identifying number.	Sress, and Av	emply Non employee Typ a quickled Identity C Robect Printer C Robect Print	oyee's records corporal period period NC Nicon included in the reconsert if applicat  as withheld 2 (for oble wage 2 784  as withheld
Employed number 28 Type 5 122 CLEV	15, 15 NORTH 32rds social security  22-4006  STICINIES  4 LURAIN  7ELEND  7124  62	1 Federal in	279.03 nd UP code below. 410 44111 3200 537	2 Wogo, H competed Nome of OHIO	2789.04 State or City State or City FELANO C	BATE OR C	EMPLOYER noise, odd ZIP code o Federal identifying number. el grap fein interest included IIV INCOME	Rate Den 2	employee property of the control of	oyee's records covered period period NC sion included in be prepared if applicat (as withheld 2 (foroble wage 2 7 8 10x withheld 2' laxable wage 2 78
Employer number 28 Type 122 CLEV	15, 15 NORTH 32rds social security  22-4006  STICINIES  4 LURAIN  7ELEND  7124  62	1 Federal in	PHILADELPHIA, PA.  come tax withheld  279.03  nd UP code below.	2 Wogo, H competed Nome of OHIO	2789.04 State or City State or City FELANO C	BATE OR C	EMPLOYER noise, odd ZIP code o Federal identifying number. ol group term once included i	River Bon 2	employers or substitution of the control of the con	oyee's records covered period period NC  Sina included in be premion Os withheld Os withheld Os withheld Os withheld Os Withheld Os Os Withheld Os Os Os Os Os Os Os Os Os Os Os Os Os O
Employed number 28 Type 5 122 CLEV	15, 15 NORTH 32rds social security  22-4006  STICINIES  4 LURAIN  7ELEND  7124  62	1 Federal in	279.03 nd UP code below. 410 44111 3200 537	2 Wogo, H competed Nome of OHIO	2789.04 State or City State or City FELANO C	BATE OR C	EMPLOYER  FORMAL  FORMAL  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal	Abon 2  TAX INFO  Wage an	employer or property of the pr	oyee's records consed period period NC sion included in be present if applicat (as withheld 2 (foroble wage 2 7 8 10x withheld 2' laxoble wage 2 78
Employer 28 Type 122 CLEV	15, 15 NORTH 32cross social security  22-4006  or print Employee's not STEELEND  4 LIPAIN  7124 62	and STREET, Former, or of the street, Former, Form	PHILADELPHIA, PA.  come tax withheld  279 - US  and UP code below.  410 44111  3200 533	2 Wope, He competed to OH IO	2789.04 Stote or City Stote or City FLANG C	BATE OR C	EMPLOYER FORMS ON THE PROPERTY OF THE PROPERTY OF PERTY OF PERTY OF PERTY OF THE PROPERTY OF T	Abo 2  TAX INFO  Nage an interest,	employer or property of the pr	oyee's records consect person NC Sion included in be prepared to withheld 2 (foroble wage 2 78 for withheld 2 foroble wage 2 78 consoble wage 3 78 consoble wage 4 78 consoble wage 5 78 consoble wage 6 78 consoble wage 7 8
Form W	15, 15 NORTH 32cross social security  22-4006  a print Employee's not still HLE.  4 LIPAIN  7ELIND  7124 62	and STREET, For the street of	PHILADELPHIA, PA.  come tax withheld  279. US  and UP code below.  410 44111  3200 537  • Information is being  ON 231989084	2 Wogo, Home of OH IO Nome of CLEV	2789.00 Since or City State or City FEL AND C	BATE OR C	EMPLOYER  FORMAL  FORMAL  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal  Formal	Bib box 2  TAX INFO  Wage an interest,	employer or property of the pr	oyee's records consed person NC sion included in be resement if applicat fan withheld 2 (favoible wags 2 78' fan withheld 2' favoible wags 2 78' fan withheld 2' favoible wags 2 78' Copy C For playee's records
Form W	15, 15 NORTH 32cross social security  22-4006  a print Employee's not still HLE.  4 LIPAIN  7ELIND  7124 62	and STREET, For the street of	PHILADELPHIA, PA.  come tax withheld  279. US  and UP code below.  410 44111  3200 537  • Information is being  ON 231989084	2 Wogo, Home of OH IO Nome of CLEV	2789.00 Since or City State or City FEL AND C	BATE OR C	EMPLOYER  Former, odd  ZiP code of Federal identifying number.  If group term owner included in the control of	Bib box 2  TAX INFO  Wage an interest,	emply employer or property of the property of	oyee's records consed person NC sion included in be resement if applicat or withheld 2 ( oxoble wops 2 78' lox withheld 2' loxoble wops 2 78' con withheld 2' loxoble wops 2 78' loxoble wops 2 78' loxoble wops 2 78' loxoble wops 2 78'
Form W	15, 15 NORTH 32cross social security  22-4006  a print Employee's not still HLE.  4 LIPAIN  7ELIND  7124 62	A OF	PHILADELPHIA, PA.  come tax withheld  279 - U3  and UP code below.  410 44111  3200 533  Information is being  ON 23-1989684 T, PHILADELPHIA	PA. 19104	2789.04 Stoke or City Stoke or City /ELANO C	FATE OR C	EMPLOYER  Foote, odd  ZiP code of Federal  identifying number.  If your lended i  Type or pr EMPLOYU  funne, odd  ZiP code of Federal  identifyin mumber  Type or pr EMPLOYU  funne, odd  ZiP code of Federal  identifyin mymber	A bear 2 TAX INFO	emply employer or property of the property of	oyee's records covered person NC sion included in be resement if applica  an withheld 2 ( aroble wags 2 78' an withheld 2' foroble wags 2 78' an all an all an all and a
Form W  LEL CONS ROOM Employee  122  CL FV  CONS ROOM Employee	15, 15 NORTH 32cc s social security  22-4006  5 or print Employee's not state of the PAIN (ELL ND)  7124 62  OLIOATED HAIL (M2)6;15 NORTH	A OF	PHILADELPHIA, PA.  come tax withheld  279. US  and UP code below.  410 44111  3200 537  • Information is being  ON 231989084	Nome of OH IO	2789.00 Since or City State or City FEL AND C	FATE OR C	EMPLOYER FORMATION FORMATI	A bear 2 TAX INFO	emply employer or property of the property of	oyee's records consed person NC sion included in be resement if applicat or withheld 2 ( oxoble wops 2 78' lox withheld 2' loxoble wops 2 78' con withheld 2' loxoble wops 2 78' loxoble wops 2 78' loxoble wops 2 78' loxoble wops 2 78'
Form W  LEL CONS ROOM Employee  122  CL FV  CONS ROOM Employee	15, 15 NORTH 32cr s social security  22-4006  5 To print Employee's not	This street in the street in t	PHILADELPHIA, PA.  tome tax withheld  279. US  nd UP code below.  410 44111  j200 533  Information is being  ON 23-1989084  T, PHILADELPHIA,  Accine tax withhold  422. 23	Nome of OH IO	2789.00 State or City State or City ELANO C the Internet R	FATE OR C	EMPLOYER  Folia or promise of the control of the co	Rate and a ben 2 land interest in the second of the second	employer or a quickle of the control	oyee's records covered person NC sinn included in be presented if application (as withheld 2 (foroble wage 2 78 for withheld 2 (foroble wage 2 78 covered 2 78 covered (as withheld (by the covered (covered (cove
Form W  LEL CONS ROOM Employee  122  CL FV  CONS ROOM Employee	15, 15 NORTH 32cc s social security  22-4006  5 or print Employee's not state of the PAIN (ELL ND)  7124 62  OLIOATED HAIL (M2)6;15 NORTH	This street in the street in t	PHILADELPHIA, PA.  tome tax withheld  279. US  nd UP code below.  410 44111  j200 533  Information is being  ON 23-1989084  T, PHILADELPHIA,  Accine tax withhold  422. 23	PA 19104	2789 Of Since or City State or City ELANO C the Internal R	FATE OR C	EMPLOYER  Folia or promise of the control of the co	Rate and a ben 2 land interest in the second of the second	employer or a quickle of the control	oyee's records covered person NC sion included in between H application on withheld 2 ( oxoble wops 2 78' lox withheld 2' loxoble wops 2 78' lox withheld 2' loxoble wops 2 78' lox between H application 16 person 16 p
Form W  LEL CONS ROOM Employee  122  CL FV  CONS ROOM Employee	15, 15 NORTH 32cc s social security  22-4006  5 or print Employee's not STI LALE  4 LIPAIN  /ELIND  7124 62	A OFFORATI	PHILADELPHIA, PA.  come tax withheld  279 - U3  nd IDP code below.  410 44111  j200 533  s Information is being  ON 23-1989684 T, PHILADELPHIA,  ncome tax withhold  422 - 13	PA 19104	2789.00 State or City State or City ELANO C the Internet R	FATE OR C	EMPLOYER  Folia or promise of the control of the co	Rate and a ben 2 land interest in the second of the second	employer or a quickle of the control	oyee's records covered period period  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8
Form W  Form W  Form W  Form W  Form W  Form W  Form W  Form W  Form W  Form W  Form W  Form W  Form W  Form W  Form W  Form W  Form W	15, 15 NORTH 32cr is social security  22-4006  or print Employee's not security  4 LIPAIN  (ELAND  7124 62  OLIDATED BAIL  (A215; 15 NORTH  227:4006  Typic point Employee's  STELHLE	This control in the state of th	PHILADELPHIA, PA.  come tax withheld  279. US  and UP code below.  410 44111  3200 537  a Information is being  ON 23.1989084  T, PHILADELPHIA.  accome tax withheld  422. 23	PA 19104	2789 Of Since or City State or City ELANO C the Internal R	FATE OR C	EMPLOYER  Folia or promise of the control of the co	Rate and a ben 2 land interest in the second of the second	employer or a quickle of the control	oyee's records covered person NC sion included in between H application on withheld 2 ( oxoble wops 2 78' lox withheld 2' loxoble wops 2 78' lox withheld 2' loxoble wops 2 78' lox between H application 16 person 16 p
Form W  Form W  LEL on  CONS  ROOM  122  CLEV  122  CLEV  122  122	15, 15 NORTH 32cr vs social security  22-4006  or print Employee's not  4 LIPAIN  (ELAND  7124 62  -2  OLIDATED HAIL OLIDATED HA	This control in the state of th	PHILADELPHIA, PA.  come tax withheld  279 - U3  nd IDP code below.  410 44111  j200 533  s Information is being  ON 23-1989684 T, PHILADELPHIA,  ncome tax withhold  422 - 13	PA 19104	2789 Of Since or City State or City ELANO C the Internal R	FATE OR C	EMPLOYER  Foote, odd  ZIP code of Federal identifying number.  If y INCOME  ITY INCOME  Type or pr EMPLOYI 'name, odd  ZIP code of Federal identifyin number  on of group term number  on of group term number  on of group term number  on of group term number include  CITY INCOME	Rate and a ben 2 land interest in the second of the second	employer or a quickle of the control	oyee's records covered period period period for withheld
Form W  Form W  LEL on  CONS  ROOM  122  CLEV  122  CLEV  122  122	15, 15 NORTH 32cr's social security  22-4006  or print Employee's not  4 LIPAIN  (ELIND)  7124 62  OLIDATED HAILO  A215; 15 NORTH  CARGON MONTH  227:4006  Tradio belon Employee's  24:0841ND	This state of the	PHILADELPHIA, PA.  come tax withheld  279. US  and UP code below.  410 44111  3200 537  • Information is being  ON 23-1989084  T, PHILADELPHIA.  accomp tax withheld  422. 13  at IP code below.	Nome of CLEV  Pernished 1  2 ways of company	2789.0/ Stote or City  Stote or City  ELANO C  the Internet R  po, and airbed airca (4,4,5)  State or City  State or City	STY  OVERNUE 3  OF CATE OR C	EMPLOYER  Foote, odd  ZIP code of Federal identifying number.  If y INCOME  ITY INCOME  Type or pr EMPLOYI 'name, odd  ZIP code of Federal identifyin number  on of group term number  on of group term number  on of group term number  on of group term number include  CITY INCOME	Rate and a ben 2 land interest in the second of the second	employer or a quickle of the control	oyee's records covered period period  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8 (  for withheld  2 (  for oble wope 2 7 8
Form W  Form W	15, 15 NORTH 32cr's social security  22-4006  or print Employee's not  4 LIPAIN  (ELIND)  7124 62  OLIDATED HAILO  A215; 15 NORTH  CARGON MONTH  227:4006  Tradio belon Employee's  24:0841ND	This control in the state of th	PHILADELPHIA, PA.  come tax withheld  279. US  and UP code below.  410 44111  3200 537  a Information is being  ON 23.1989084  T, PHILADELPHIA.  accome tax withheld  422. 23	Nome of CLEV  Pernished 1  2 ways of company	2789.0/ Stote or City  Stote or City  ELANO C  the Internal R  ps, and altreval psilon or City  Store or City  Store or City	STY  OVERNUE 3  OF CATE OR C	EMPLOYER  Foote, odd  ZIP code of Federal identifying number.  If y INCOME  ITY INCOME  Type or pr EMPLOYI 'name, odd  ZIP code of Federal identifyin number  on of group term number  on of group term number  on of group term number  on of group term number include  CITY INCOME	Rate and a ben 2 land interest in the second of the second	employer or property of the Property of Tax St Carlotte or property of the Property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property of Tax St Carlotte or property or pr	oyee's records covered period period period for withheld

	E o	104	40 January 1-Dece	mber 31, 1975, or	⊗ Indiv	/idua	linc	ome	Tax	Retui	'n	19	975
	A	Name ()		Thatty J.			ast name			ial security		For Privacy Act No see page 2 of Ins	
	p dat	Present	home address (Num 12224	ber and street included and a street included a	ing apartment numb	er, er rumi n	oute)		Spaye's	Agrial sec		For IRS use o	inly
	ž	City. to	on or specialize St	ind, Uhiio 4	4111							switchmen op Operator	<u> </u>
	Cer	quested nsus Bur Revenue aring	eau etc.,	hat city, town, vill do you live? reland	limits o	live within If the city, to No   Do	own, etc.?	C in w County Cuyal	•	and State	do you liv State Ohio	D in what low you live? (See	
	Filing Status	3 🗍	Married filing Married filing spouse's social and enter full name here	check only ONE Joint return (eve separately, If security number in	en if only one had spause is also fil n designated spac	ing give æ above	otions q	First nar lived with	mes of y	Putmder	endent ch	er number of es checked	
	i		► Qualifying wid	of Household (Se	ependent child	(Year	e /	Age 65 or Blind .	٠ أ	Yourse	elf 🔲 Sp	ouse Enter number of boxes checked	
		.l	SDOUSE died	. 19)_See_n	ane 5 of Instru	ctions 1		bel. Istal	d lines 6d		d Tox Sto	tement 1975	· -
		N CENT	•	RTATION COM	23-600076	5			EAAF nam ZIP Fede Iden	tifying :	A Was ample	Copy C. For his property of the position with the position with the position with the position with the position of the position with the position with the position of the po	
1		88-22	cial security -		948.55	2 Wages, hi compensal	ps, and other from 9226	-19		up term life cluded in ban	C Au 2 C Au	cration included in beauthoursement if applicable	
	) C	s t	EIMLE LORAIN A	me, address, and III	r code below.	Nome of S	State or Cit		OR CITY INC	OME TAX	NFORMATIO	Tostwitheld 65.	
	CI	LEVEL	AND	OHIO	44111	Nome of 5	State or Cit	y	·		<del>-</del>	9226. Tox withheld	19
	PC	0640	05 629	895 3	200 539	CLEVI	ELAND	CITY	<u>'</u>	<u>.</u> :	OH	Taxoble wage	
		W-2	:.	. This info	rmution is being t	urnished to	the Inter	no) Revenu	o Sarvica.	Dogarton	nt of the Tream	9226.	
		o pue 1	7 Credits (fro	on line 54) .  Ubtract line 17 f							17	-0- 201	-50
	er here	15 13	Other taxes	(from line 63) lines 18 and 19	· · · · · ·			· · ·		18 : 55	19		-50
	or Money Order	ax, Paym	b 1975 estin c Earned inco	al income tax nated tax payr ome credit . id with Form 48	WITCHELD W-2P (include a) THERES credit from	to from W-1 to front) mount allowed 1974 return	st ss	b C d	1,4		Pay a full w social check	mount on line 23 th this return. Wri security number or money order ar payable to intern	in //
	정	22	e Other paymo	ents (from line ( lines 21a throu	57) gh e)	· · · · ·	. <u>_</u>	e		<u> </u>	/// Reven	us Service.	
	O.		(Check here > If line 22 is Amount of I	larger than line  , if Form 2210, I larger than line line 24 to be RE line 24 to be c 5 estimated tax	form 2210F, or states 20, enter amou EFUNDED TO Y red-	ment is ellach ent OVERI	PAID	8 of 1031700 600 00	· · · · · · · · · · · · · · · · · · ·	nuaea (jiue	(25), make	2,213 1,613 [line 24) is to be no entry on line 26	20 -29
	s	ign ere	rr ponulties of perjuit no, correct, and con	ny, I declara that I hampleta. Declaration o	ave examined this to		ng attompar is based on ,		eles and state	ments, and properer has	to the besk of any knowled	my knowledge and b	/18/7
			pouse's signature (	f filing Jointly, BOTh	f most sign even it	only one had	income)	193			has (and 21)		

copy

NOT THE	year January 1-December 31, 1974, or other taxable me (If joint return, give lirst names and initials of both)			, 19
		Last name	COUNTY OF RESIDENCE	Your social security number
P	esont hume address (Number and street, including apartment number	teimle, Jr.	-	288 22 4006
	12224 Lorain Ave.	er, or turns rouse)	C	Spouse's social security no.
G		ace label within block	Cuyahoga	297 14 9977
	Cleveland, Chic 44114	•	Dation Chouse's - H	ke Shop Uperator
F	ling Status (check only one)	Exemptions	<del> </del>	ii
1	Single	6a Yourself	Regular / 65 or o	Enter
2	Married filing joint return (even it only one had in	ncome) b Snouse .		number of boxes 2
3	Married filing separately. If spouse is also filing	ng give	s of your dependent c	bildron who bread with
:	spouse's social security number in designated space and enter full	above you Thou	nas	mioren who hash arm
ł	name here	Den		<del></del>
4	Unmarried Head of Household (See instructions on page	5)		Enter 2
_	- >	d Number of	other dependents (fro	m line 27)
- °	Widow(er) with dependent child (Year spouse died ►	7 Total exen	options claimed	
	The state of the s	13 of value layor for this tun	Yes N	<del></del>
			•	· · · · · · · · · · · · · · · · · · ·
PENN	CENTRAL TRANSPORTATION COMPANY, DEBT	OR Type of pris	• Wage and∂	ax Statement 10
	23-60007 215, 15 NORTH 32nd STREET, PHILADELPHIA, PA	745	umber,	110
2 TO 1 10	FEDERAL INCOME TAX INFORMATION	1. 19104 and 21P cod		mployee's resords
	Til 11 Ti	+	STATE OR CITY INCOME TA	X DIFORMATION
(	E D a mer	8 Name of State or	City	6. Tox w
	500.55 6256.75	CLEVELAND CI	LTY.	HO 6
EMPLOY	TES social security number > 283-77-4004	1		7   Tanobk
: I bolone	A Maria Comment of the Comment of th		<u> </u>	6250
(Pina)	320 539	11 Name of State of	City	9 Ton'w
122	STEIMLE 629895	OHIO	nga sa katalan sa katalan sa katalan sa katalan sa katalan sa katalan sa katalan sa katalan sa katalan sa kata Katalan sa katalan sa k	2
4.22	4 LORAIN A	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1.5	
70 E V	E. ANG	<ul><li>□ 】 進 * 200 元 元 元 元 元 元 元</li></ul>		70xoble
្រាះខាង	ELANO OHIO 44111			10 10 10 10 10 10 10 10 10 10 10 10 10 1
וני חיים ות ליכא	Vity for bing a springer may arrow	Cost of group term life insurance included in hos	2 Relocation induces	led in bor 7 J A
וה ליכא ור ליכא	ELANO OHIO 44111 why full bing a guinate may accomply the first addition of the first addition of the first and the second accomplying th	insurance included in box		6256 led in box 7 J I/A I opplicable
kod ni	very full blood a synthetic may accommode the later about noted to regions with all habitations of the later about	H this is	a corrected form, put on "X"	6256 ded in ben 2 J /// d applicable. In the upper left corner.
יים מיים מיים איים מיים איים	ning out bing proporates may decree the second of an expense and of habilities on the control of the second of behaviors on the control of the second of the	insurance included in box	a corrected form, put on "X"	6256 led in box 7 J I/A I opplicable
א ליים ליים ליים ליים ליים ליים ליים ליי	way not bing a quirates may access, and a facility of the fact of particles of the fact of	If this is	a corrected form, put on "X"	6256 ded in ben 2 J /// d applicable. In the upper left corner.
1 0 ·	Type or prior EMPOTE'S name, address and EM code above.  19 Other taxes (from time Ox)	If this is	e corrected form, put on "X"  Department of the Tree	6256 ded in ben 2 J /// d applicable. In the upper left corner.
ار المارية الحال المارية	Type or prior EMPLOTE'S name, address and EM code above.  19 Other taxes (from line O1)  20 Total (add lines 18 and 19)	If this is	a corrected form, put on "X"	for the upper left corner.  In the upper left corner.  Intra parternal Revenue Service.
and C	Type or prior BMROTES name, address and EM code above.  19 Other taxes (trom line 61) 20 Total (add lines 18 and 19) 21a Total Federal income tax withheld (attack)	If this is	e corrected form, put on "X"  Department of the Tree	6250  find in long 2 J M  disposition in the upper left corner.  Sury Internal Revenue Service
and C	Type or print BMROTETS name, address and EM code above.  19 Other taxes (from line 61) 20 Total (add lines 18 and 19) 21a Total Federal income tax withheld (attac W-2 or W-2P to front)	H this is Form W—2  Ch Forms  21a	Department of the Tree	in the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.
and C	Type or prior EMPLOTE'S name, address and EMP code above.  19 Other taxes (from line 61) 20 Total (add lines 18 and 19) 21a Total Federal income tax withheld (attack W-2 or W-2P to front) b 1974 estimated tax payments (include	h this is form W—2	e corrected form, pur on "N"  Deportment of the Tree  20  500 55	in the upper left corner.  In the upper left corner.  Sury_Internal Revenue Service  1 you 10  2ay amount on line 23  In full with this return.
Order here	Type or prior EMPLOTIE'S nome, address and IP rods above.  19 Other taxes (trom line 6.)  20 Total (add lines 18 and 19)  21a Total Federal income tax withheld (attain W-2 or W-2P to front)  b 1974 estimated tax payments (include allowed as credit from 1973 return)	h this is Form W—2	Deportment of the Tree  500 55	in the upper left corner.  In the upper left corner.  In the upper left corner.  In your left remove Service  Tayon 10 S
y Order here	Type or prior EMPOTE'S none, address and IP rob above.  19 Other taxes (trom line 6.)  20 Total (add lines 18 and 19)  21a Total Federal income tax withheld (attain W-2 or W-2P to front)  b 1974 estimated tax payments (include allowed as credit from 1973 return)  c Amount paid with Form 4868, Application to	this is Forms 21a 2 amount b	Department of the Tree  500 55 745 44	In the upper left corner.  In the upper left corner.  Sury Internal Revenue Service  Pay amount on line 23  In full with this return.  Write social security  number on check or  noney order and make
y Order here	Type or prior EMPOTE'S none, address and EMP rods above.  19 Other taxes (from line 61) 20 Total (add lines 18 and 19) 21a Total Federal income tax withheld (attal W-2 or W-2P to front) b 1974 estimated tax payments (include allowed as credit from 1973 return) c Amount paid with Form 4868, Application to Extension of Time to File U.S. Individual Income	this is Forms 21a 2 amount b	Department of the Tree  500 55 745 44	in the upper left corner.  In the upper left corner.  In your Internal Revenue Service  1, your 10 cm  Pay amount on line 23  In full with this return.  Write social security  number on check or
y Order here	Type or prior button the first seems address and IP code above.  19 Other taxes (from line 0.).  20 Total (add lines 18 and 19).  21a Total Federal income tax withheld (attack W-2 or W-2P to front).  b 1974 estimated tax payments (include allowed as credit from 1973 return).  c Amount paid with Form 4868, Application to Extension of Time to File U.S. Individual Income d Other payments (from line 65).	this is form W—2.  Ch Forms 21a 2 amount b	Department of the Tree  500 55 745 44	in the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In your filtered Revenue Service  Tayon fill  Tayon fi
y Order here	Type or prior EMPOTE'S none, address and EMP rods above.  19 Other taxes (from line 61) 20 Total (add lines 18 and 19) 21a Total Federal income tax withheld (attal W-2 or W-2P to front) b 1974 estimated tax payments (include allowed as credit from 1973 return) c Amount paid with Form 4868, Application to Extension of Time to File U.S. Individual Income	this is form W—2  ch Forms 21a 2 amount b or Automatic Tax Return c	Department of the Tree  500 55 745 44	in the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In your first of Revenue Service  Tayon fill  Tayon fi
y Order here	19 Other taxes (from line 02) 21a Total (add lines 18 and 19) 21b 1974 estimated tax payments (include allowed as credit from 1973 return) 22 Amount paid with Form 4868, Application to Extension of Time to File U.S. Individual Income d Other payments (from line 65) 22 Total (add lines 21a, b, c, and d)	this is Form W—2  Ch Forms 21a 2 amount b rautomatic Tax Return d	Department of the Tree  500 55  745 44	in the upper left corner.  In the upper left cor
y Order here	19 Other taxes (from line 02) 21a Total (add lines 18 and 19) 21b 1974 estimated tax payments (include allowed as credit from 1973 return) 22 Amount paid with Form 4868, Application to Extension of Time to File U.S. Individual Income d Other payments (from line 65) 22 Total (add lines 21a, b, c, and d) 23 If line 20 is larger than line 22, enter BA	this is Form W—2  Ch Forms 21a 2 amount b rautomatic Tax Return d	© corrected form, put on "X"  Department of the Tree  20  500 55  745 44	in the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In your file the properties  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.
Ch Check or Money Order here  Due Tax, Payments and C	Type or prior BANCOTETS norm, address and ID rock above.  19 Other taxes (from time 02) 20 Total (add lines 18 and 19) 21a Total Federal income tax withheld (attac W-2 or W-2P to front) b 1974 estimated tax payments (include allowed as credit from 1973 return) c Amount paid with Form 4868, Application to Extension of Time to File U.S. Individual Income d Other payments (from line 65) 22 Total (add lines 21a, b, c, and d)  13 If line 20 is larger than line 22, enter BA (Check here )	this is form W—2  Ch Forms 21a 2 amount b rautomatic Tax Return d  ALANCE DUE IRS	© corrected form, put on "X"  Department of the Tree  20  500 55  745 44	in the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In your first of Revenue Service  Tayon fill  Tayon fi
Ch Check or Money Order here  Due Tax, Payments and C	Type or prior BMROTETS from, address and EP rode above.  19 Other taxes (from line 01) 20 Total (add lines 18 and 19) 21a Total Federal income tax withheld (attack w-2 or W-2P to front) b 1974 estimated tax payments (include allowed as credit from 1973 return) c Amount paid with Form 4868, Application to Extension of Time to File U.S. Individual Income d Other payments (from line 65) 22 Total (add lines 21a, b, c, and d)  23 If line 20 is larger than line 22, enter BA (theck here )	this is  Form W—2  Ch Forms  2 amount  b arAutomatic Tax Return  d  ALANCE DUE IRS  potential is attached. See instruction	© corrected form, put on "X"  Department of the Tree  20  500 55  745 44	in the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In your file the properties  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.
Ch Check or Money Order here  Due Tax, Payments and C	Type or prior BANCOTETS norm, address and ID rock above.  19 Other taxes (from time 02) 20 Total (add lines 18 and 19) 21a Total Federal income tax withheld (attac W-2 or W-2P to front) b 1974 estimated tax payments (include allowed as credit from 1973 return) c Amount paid with Form 4868, Application to Extension of Time to File U.S. Individual Income d Other payments (from line 65) 22 Total (add lines 21a, b, c, and d)  13 If line 20 is larger than line 22, enter BA (Check here )	this is  Form W—2  Ch Forms  2 amount  b arAutomatic Tax Return  d  ALANCE DUE IRS  potential is attached. See instruction	© corrected form, put on "X"  Department of the Tree  500   55	in the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In your file the properties  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.  I your file source.
Ch Check or Money Order here  Due Tax, Payments and C	Type or prior BANCOTETS norm, address and ID rode above.  19 Other taxes (from time 01) 20 Total (add lines 18 and 19) 21a Total Federal income tax withheld (attac W-2 or W-2P to front) b 1974 estimated tax payments (include allowed as credit from 1973 return) c Amount paid with Form 4868, Application to Extension of Time to File U.S. Individual Income d Other payments (from line 65) 22 Total (add lines 21a, b, c, and d)  23 If line 20 is larger than line 22, enter BA (Check here ) if from 2210, from 2210f, or state 11 line 22 is larger than line 20, enter arm 25 Amount of line 24 to be REFUNDED TO 25 Amount of line 24 to be cred	this is  Form W—2  Ch Forms  2 amount  b arAutomatic Tax Return  d  ALANCE DUE IRS  potential is attached. See instruction	© corrected form, put on "X"  Department of the Tree  500 55  745 44  23  ns on page 7.)  24  25	in the upper left corner.  In the upper left corner.  In the upper left corner.  In you fill the upper
y Order here	Type or prior button(ETS norm, address and ED rode above.  19 Other taxes (from time 02).  20 Total (add lines 18 and 19).  21a Total Federal income tax withheld (attack w-2 or W-2P to front).  b 1974 estimated tax payments (include allowed as credit from 1973 return).  c Amount paid with Form 4868, Application to Extension of Time to File U.S. Individual Income d Other payments (from line 65).  22 Total (add lines 21a, b, c, and d).  23 If line 20 is larger than line 22, enter BA (Check here >	this is form W—2  Ch Form S—21a  Parautomatic Tax Return d  ALANCE DUE IRS  Patential of the control of the con	20   20   55   745   44   745   44   745   44   745	in the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In your file special service.  I good file ser
Balance Due Tax, Payments and C.	Type or prior EMPLOTE'S none, address and EMP robe above.  19 Other taxes (from line 64) 20 Total (add lines 18 and 19)	this is form W—2  this is form W—2  ch Forms  2 1a  ch Automatic  Tax Return  d  ALANCE DUE IRS  alement is attached. See instruction  DOUNT OYERPAID  YOU	c corrected form, put on "X"  Department of the Tree  500 55  745 44  23  23  24  24  21  21  21  21  21  22  23  23  24  25  26  27  28  29  20  20  20  20  20  20  20  20  20	in the upper left corner.  In the upper left corner.  In the upper left corner.  In you fill the upper
Please attach Check or Money Order here  Balance Due Tax, Payments and C.	Type or prior EMPOTE'S nome, address and EP rich above.  19 Other taxes (from line 0.)  20 Total (add lines 18 and 19)	this is form W—2  this is form W—2  ch Forms  21a  amount  brautomatic  Tax Return  d  ALANCE DUE IRS  alement is attached. See instruction  DOUNT OYERPAID  YOU	c corrected form, put on "X"  Department of the Tree  500 55  745 44  23  23  24  24  21  21  21  21  21  22  23  23  24  25  26  27  28  29  20  20  20  20  20  20  20  20  20	in the upper left corner.  In the upper left corner.  In the upper left corner.  In you fill the upper
Balance Due Tax, Payments and C.	Type or prior EMPLOTE'S none, address and EMP robe above.  19 Other taxes (from line 64) 20 Total (add lines 18 and 19)	this is form W—2  this is form W—2  ch Forms  21a  amount  brautomatic  Tax Return  d  ALANCE DUE IRS  alement is attached. See instruction  DOUNT OYERPAID  YOU	c corrected form, put on "X"  Department of the Tree  500 55  745 44  23  23  24  24  21  21  21  21  21  22  23  23  24  25  26  27  28  29  20  20  20  20  20  20  20  20  20	in the upper left corner.  In the upper left corner.  In the upper left corner.  In the upper left corner.  In your first of Revenue Service  I good fill state of the corner.  I good fill state of the corner.  I good fill state of the corner.  I good fill state of the corner of the

FILE COPY

		<b>£1040</b> (	JS Indiv	ent of the Treasury—Ir idual Income	temal Revenue Service Tax Return	1973
		For the year January 1—December 31, 19  Rhome (II joint return, give first memas and II  Christ & Betty  Present home address (Humber and street, II  12224 Lorsin Ave  City, town or post office, State and ZIP code	973, or other taxable initials of both)	test name	COUNTY OF RESIDENCE	Your social security number  Spouse's social security no.
,	Γ	Post office, State and Zip Cool				iroad Switchman Umy Shop Operator
***************************************	not file) FILE -	om 100A.) et to lemize, deductions.  3 000.00  53 52.30  on page 4 or tax on the  8 76 94  (WIN)	\$1.008: if less, multiply 36 /// computations.)  tax on gasoline, special  #96 6	determine the safed Tax Pay	(c) (d) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	Blind Enter number of boxes checked be n who lived with  Enter number 2 e 27)
[					4 4 4 4 4	18 05 4,563 89
) :		PENN CENTRAL TRANSPORTATION	COMPANY, DEBTO	R Type or print	Wage and Ta	x Statement 51030
.		ROOM 215, 15 NORTH 32nd STREET,	PHILADEIPHIA DA	5 identifying number oddress and ZIP code	Copy C for emp	DIE CONTRACTOR OF THE PROPERTY
	:Ur	FEDERAL INCOME TAX INFOR	Wation Wages, sips and	1	STATE OF CHE PAGE 1	altonia intology
10人件		496-61	5929.91	8: Name of State or C		6. Tax withhold
÷ .	- 1"	EMPLOYEE'S social security number > 26	18-22-4006		11	DH 59.30
:	1	E STEIN - 3	20 539		The state of the second	7 Tanoble wage 5929.91
	i	114444 LIBRAIN A	29895	11 Nome of Stone or G		9 Tas withhold
•	12.7	CLEVELAND OHI	0 44111	**************************************	S. E. M. S. O. O.	28.48
•	٠	The second second	- 11414	Cost of group term Ele	a there are an a	10 Involte wope - 5929.91
•	J.			hourance included in box 2	Relocation included in reimbersament B. appi	bos 7  Excludable sick pay included in box 7
				If this is a	specied form, put on "X" in a	
	·	Type or print EMPLOYEE'S noone, address and I	IP code obose.	Form W-2	Department of the Treasury	-Internal Revenue Service
	974	Table Services of the services	<u> </u>	2-00021		
:	1 Enter amount of Adjusted Cares Inc.	# 씨든을 5차 등 등 등 x 등 - ' 는 ' -	the amount by .08. (if joint declaration of the same o	The control of installments:  Is due to  Is due to  Secretarial of June 15, 1974, enter 17, 19		

## FILE COPY.

For the year January 1-D Place label on		ive first names and initials of	both)   Staim!	Lost name	Your social accusity number Blusband's, if joint roturn)
A contraction of the contraction	8.0				R R Suitchmen Bike Shop Opets
7 800°0 7 800°0 7 800°0 7 800°0 7 800°0	780.0	411.00	Yments Total ameunt paid and gradited from Jan. 1 Mough the	intellment date brown. Add Ib), and let	/;Blind Enter number of hones checked who lived with
pect to item.	A. OO: If less, ake separate separate con gaso.	or more. file	ion below to		32) 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
PENN CENTRA	AL TRANSPORTATIO	N COMPANY, DEBTO	In   In   In   In   In   In   In   In	the last reserve by employee Jeaned in the last regard to payment any	latina populi deleritari er dita per prodesiona er anti piarte per pero lastes las mora
Federal brane for Wilheld	FEDERAL INCOME TAX INFO	, PHILADELPHIA, PA. 191 MATION	04 (opr	E AND TAK STATEMEN  ( - For employee's records  BUT INFORMATION	(s. 3% A 10 of t
286.98			and (Not Sub	jed to FJCA)	UNCOLLECTED EMPLOYEE TAX ON TIPS
		707	. ]	· · · · · · · · · · · · · · · · · · ·	
TYPE OR PRINT EMPLOYEE'S SOCIAL SECURITY NUMBER		NAM	OF STATE OF CITY		GROSS TARABLE WA
SOCIAL SECURITY NUMBER	288- 320 5	NAM	VELAND CI		OH 4233 • 5 E
SOCIAL SECURITY NUMBER	288- 320 5	22-4006 CL 39 629895	VELAND CI		OH 4233.56
SOCIAL SECURITY NUMBER	288- 320 5	22-4006 CL 39 629895	O'SMIE OR GIV	TY	OH 4233.5E IAX.WITHELD 41.21 GHOSS TAXABLE WAR
SOCIAL SECURITY NUMBER —	288- 320 5	22-4006 CL 39 629895	O'SMIE OR GIV	TY	OH 4233.56 DAX.witherio 41.21
CLEVEL AND CLEVEL AND CLEVEL AND	288- 320 5	22-4006 CL 39 629895	OF SPIEDROW	TY	OH 4233.56  DAX WITHHELD  41.21  GHOSS TAXABLE WAR  3912.62
CLEVEL AND CLEVEL AND CLEVEL AND	288- 320 5	22-4006 CL 39 629895	change changing to the Agrange change of the Agrange change  TY	OH 4233.56  DAX WITHHELD  41.21  GHOSS TAXABLE WAR  3912.62	
Table Users own Table Users own Table Users own Table Users own Table Users own Table Users own Table Users of	A O HIO	(withheld and less line 10). [65 96 62 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	ax should che mount che amount che che mount che computed Computed	Annual Merica (sp. 1972) and the sp. 1972 and the sp. 197	CH 4233.5E  TAX WITHERD 41.21  CROSS TANABLE WAR 3912.62  TAX WITHERD, 3  14.14
red Gross Incorn nother Breants and Table USERs OWIT nother Breants and Table 1 (in reach, including fi 29 and 2b. The E 3 (see page 4 and 10	A O HIO	(withheld and less line 10). [65 96 62 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	ax should che mount che amount che che mount che computed Computed	Annual Merica (sp. 1972) and the sp. 1972 and the sp. 197	OH 4233.56  IAX WITHHID 41.21  GROSS TAXABLE WAR 3912.62  TAX WITHHID 14.14
red Gross Incorn nother Breants and Table USERs OWIT nother Breants and Table 1 (in reach, including fi 29 and 2b. The E 3 (see page 4 and 10	A O HIO	ngome tax withheld and tax (line 9 less line 10). It is than 10). It is than 10 less than tion-voucher. It less than of installments:  April 15, 1973, ent. W. Santenther 15, 1973, ent. Santenther 15, 1973, ent. Santenther 15, 1973, ent. Santenther 15, 1974.	ax should che mount che amount che che mount che computed Computed	Annual Merica (sp. 1972) and the sp. 1972 and the sp. 197	OH 4233.56  IAX WITHHID 41.21  GROSS TAXABLE WAR 3912.62  TAX WITHHID 14.14
red Gross Incorn nother Breants own reach, including figs of line 1 (iii) and 25 The Casch, including figs and 25. The Gast prior year investigation of the control of the	A O HIO	ngome tax withheld and tax (line 9 less line 10). It is than 10). It is than 10 less than tion-voucher. It less than of installments:  April 15, 1973, ent. W. Santenther 15, 1973, ent. Santenther 15, 1973, ent. Santenther 15, 1973, ent. Santenther 15, 1974.	lled on: ( January 15, 1974, O 9 (	Annual Merica (sp. 1972) and the sp. 1972 and the sp. 197	OH 4233.56  IAX WITHHID 41.21  GROSS TAXABLE WAR 3912.62  TAX WITHHID 14.14
Enter amount of Adjusted Gross Incom  TAX TABLE USERS OWIT  (Ceutian: If another person is end  If you expect to itemize deductions,  ize deductions, enter 15% of line 1 (ii)  Examptions (\$750 for each, including  Line 1 less the total of 2a and 2b. Th  Tax on amount on line 3 (see page 4)  Tax from recomputing prior year inve	288- 320 5	Estimated income tax withheld and Estimated tax (line 9 less line 10). Ithe declaration-voucher, It less than Computation of installments:  declaration April 15, 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is 1973,	lled on: ( January 15, 1974, O 9 (	Block A on declination-voocher, journal of the state of t	OH 4233.56  TAX WITHHILD 41.21  GNOSS TAMABLE WAR 3912.62  TAY WITHHILD 14.14  428 38
2a If you expect to itemize deductions.  Tax TABLE USERS OMIT  (Ceutien: If another persons end  ize deductions, enter 15% of line 1 (ii).  2b Exemptions (\$750 for each, including  Line 1 less the total of 2a and 2b. Th  Tax on amount on line 3 (see page 4).  Tax from recomputing prior year inve	multiply the amount by 08. (If joint of partial partia	Line 7 less fine 8	ax should che mount che amount che che mount che computed Computed	Block A on declaration-voocher, Sales (18 Amount olisa yest a west and spained for the 1973 entimated tax and applied to date (b) Payments made on 1973 declaration (d) Payments made on 1973 declaration (d) Payments and applied to date (d) Past of lines 2 (a) and 2 (b).	OH 4233.56  TAX WITHHILD 41.21  GNOSS TAMABLE WAR 3912.62  TAY WITHHILD 14.14  428 38
2a If you expect to itemize deductions. 2a If you expect to itemize deductions. 2b Examptions (\$750 for each, including 3 Line 1 less the total of 2a and 2b. Th 4 Tax on amount on line 3 (see page 4 5 Tax from recomputing prior year inve	multiply the amount by 08. (If joint of page 2 and lines 4, 5, and 6	Estimated income tax withheld and Estimated tax (line 9 less line 10). Ithe declaration-voucher, It less than Computation of installments:  declaration April 15, 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is due to Somether, It is 1973, ent is 1973,	Note: If your estimated tax should che determine the amended amount Amended Comput (Use if estimated ax is substantially change ration-vouched tax if ferry household.)  1 Amended estimated tax (finer household.)	Block A on declination-vouched.  2 Less:  (a) Amount of last vers's averagement elected for it of 1973 entimated tax and applied to date.  (b) Poyments made on 1973 declaration.  (c) Total of lines 2 (a) and 2 (b).  (d) Amount to be solid (in 3 divided he and applied).	OH 4233.56  DAX WITHHELD  41.21  GROSS TAXABLE WAR  3912.62  TAX WITHHELD  14.14  428 38  17.38  19.00  17.38  17.38

FIL	E.	20	Y
Service	· 5 · •	· 450	30 T

	Place label on	December 31, 1971, or other Name (If Joint return, give tirst n	ames and laitinfo as	hoth		1971, endl		19
	form you file.	Christ & Bo			Steiml	t name	Your social soci	aRy number
	Correct name, etc., If necessary.	Present home address (Number an	d street, including an	artment num	mber, or speak contain	.0	Speuse's social	. I
	Enter social security number(s)	12224 Lorei	n Avn				appears a social	i I
	only if incorrect or	City, town or post biffice, Slate and	ZIP code	ce label	uere	Det	Your Rady	oed Switch
	not shown on label.	Clevelend				pati	Spouse's Bike	
	Filing Status—	check only one:			ptions	Pomiles 1	66 as assault 1915 at	· · · · · · · · · · · · · · · · · · ·
	1 Single			-	urself	negular /	65 or over / Blind	Enter
	Z [X] Married fili	ng jointly (even if only one	had income)	B Sp	ouse (applies on Z or 6 is	nja je njena j 💢		of boxes checked 2
	Riversity of the sponto's a	ng separately and spouse	is also filing.	9 Fir	۱۷ or ۱۵ st names of v	: cheched) → Dur dependent	Ehildren who liv	ad with
	Shera and a sud	antet that tome pete >-		you	Christ 3	rd - Thoma	s - Daniel	
<b>5</b> 1 A		Hand of Household		L				nter 3
inter	ini dan inggana Kabupaten			100		Carrier,		
	19/2 Est	imated Tax Worksh	eet (Keep	for vo	ur record	sDo ====	intelligence	iest - 5
1 E	inter amount of address	ed gross land				110I	ine)	· - [
	TAX TARI F II	ed gross income expected	in 1972 (see In	struction	11),	T	8708.37	<u>   72</u>
		SERS OMIT LINES 2 AND 3 AND I (See Publication 713 to	MIFD TAY EDAM TO	AX TABLE (	ON LINE 4	Γ		
· ;	FNN CENTERS TRANS		77		4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Y-03-03-03		
		SPORTATION COMPANY,	ADDD744 ''		WAGE AN	D TAX ST	ATEMENT 1	971
R	100M 215, 15 NORTH 3	2nd STREET, PHILADELPHIA,	PA. 19104			or employee'.		
	PP-9		· .	<u> </u>		empioyee	> records	
1	Federal income tax	AL INCOME TAX INFORMATION Wages poid subject to with-			OCIAL SECURIT	INFORMATION	STATE TAXES Y	LIOCAL
	withhold	holding in 1971 1	Other compensor				(si.	
	\$361.19		*			10		
. L		\$4217.72			(Not subject to	(F. I. C. A.)	\$4	2.18
1)	ype or print EMPLOYEE'S	ocial security number	33 400 1		Includes tips re	ported by small	oyee. Amount is be	•. •
		7 288	-22-4006	Louis	DECRETIONS OF SICI	poy exclusion.		-
1.	C STEIML		6298955		Add this item t	woges in figuri	ng the amount to b	reported
1	12224 LOR	LIN A	320 539	1 ===	-Pas min talansi	on your income	Fux refuen.	
-   -	CLEVELAND		111	2 2 3				namananan
			,		<u>;</u>	ta ika ang kanalang br>Kanalang kanalang ka	180.00	
Ty	rpe or print EMPLOYEE'S	nome and address (including ZIF	code) above.	Uncol	lected Employee	Tax on Tips	1.24 / 1	
, F	ORM W-2 - U. S. Trousu	ry Department, Internal Revenue	Sorvice : 5				***************************************	
==	ih:	5, 1972, enter 1/4	<u> </u>		· · · · · · · · · · · · · · · · · · ·			
	Senter	iber 15, 1972, enter 1/3	of line 11 here	and on II	ine 1 of origina		110.56	<u> </u>
-	filed on: January	15, 1973, enter amount	and subseque	nt declar	ration-vouche	rs		
·	If your actionated to		1		: • • • • •		e de la companya de l	7 20
TF- I	below to determine the	should change during the size amended amounts to b	year, you may u e entered on se	se the a	mended comp	utation		
TF- I			7.00 0// [//	ie deciar	ation-voucher		· .	<i>Milli</i>
TF- I	Amended Co		l .	Record	of Estimater	Tex Paymer	ola -	5 85
TE:	Amended Co	lly changed att - m				1971	bled Income letel	
TE:	Amended Constituted tax is substantial the filed.)		13 n.		A	1 - 13/1		11 51
TE:	Amended Constantly authorities of the Amended tax is substantly the file of the Amended tax (Ehlef his Amended tax).	ire and in	Parkens (a	ite ))	Amount (b)	Overpayment Credit applied	and credited from Jan. 1 through the	
TE:	Amended Co stimuted tax is substantili- ther filed.) ed definated tax (Enter in A on declaration-voucher on declaration-voucher to last years oversament to last german areas	ire and in	V Cauchy V C		Arrovat (b)	Orerneyment	installment data shown. Add (b) and (c)	
IF or -vout heriote och Amou eredit date	Amended Constructed tax is substantly ther filed.) and cellinated tax (Ehlef his an declaration voucher out of last year's overpayment to last year's overpayment to last year's overpayment to last year's overpayment.	ere and in	A Course		•	Overpayment credit applied to installment	Jan. I through the	
TE:  If or a pout from de ock A mou credit dete from the properties of the propertie	Amended Constructed that the substantial ther filed.)  and designated this (Enter his a manufacture that the substantial that the substantial that the substantial that and and and and and and and and and and	ere and in	1 2		11056 11056	Overpayment credit applied to installment	installment data shown. Add (b) and (c)	
TE:  Voide  Void	Amended Constructed to the substantial ther filed.)  and destinated this (Enter his an declaration voucher to 1972 estimated this and the substantial this and the substantial this and the substantial made on 1972 declaration of Rose 2(a) and 2(a)	bre and in	2 3		11056 11056 11056	Overpayment credit applied to installment	installment data shown. Add (b) and (c)	
TE:  Voice  Voice  Amount  Payment  Total  paid	Amended Co stimuted tax is substantin ther filed.) ad entimated täx (Ehref hi en declaration-voucher ant of last year's overpayment to 1972 estimated fax end ents made on 1972 declaration of Rees 2(a) and 2(b) beforce (line 2 (b) line	ere and in efected for applied to	1 2		11056 11056	Overpayment credit applied to installment	installment data shown. Add (b) and (c)	
TE:  Vouc  Amou  endit  date:  Total  puid  of of	Amended Constructed to be substantially set outlined. A on declaration woucher to leave the leave to leave the leave to leave the leave to leave the leave to leave the leave to leave the	bre and in  olicited by obplied to  2 (c)) by num-	2 3		11056 11056 11056	Overpayment credit applied to installment	Jee. I through the installment data shown. Add (b) and (c)	
TE:  Vouc  Amou  endit  date:  Total  puld  of of	Amended Co stimuted tax is substantin ther filed.) ad entimated täx (Ehref hi en declaration-voucher ant of last year's overpayment to 1972 estimated fax end ents made on 1972 declaration of Rees 2(a) and 2(b) beforce (line 2 (b) line	bre and in  olicited by obplied to  2 (c)) by num-	1 2 3 4		11056 11056 11056 11056 11058	Overceyment credit a palled to instoriment (c)	Jee. I through the installment date shown.Add (b) and (c)	
TE:  o if or  rough  Arinde  lock Arinde  rough	Amended Co  attimated tax is substantis ther filled.  and estimated tax (Enter in A on declaration-voucher ent of last year's compayment to 1972 estimated fax and tax year's compayment to 1972 estimated fax and sets, made on 1972 declaration of lines 2(a) and 2(b)  belonce (line 2 less line) to be paid (line 3 divided amaining inetallments, (Er line 1 of declaration-vou  Sign   Your streature	bre and in oldered for obplied to	Total		11056 11056 11056 11056 11058 44446	Overpayment credit applied to installment (c)	Jee. I through the installment date shown.Add (b) and (c)	∏ No
TE:  If on	Amended Constructed to be substantially set outlined. A on declaration woucher to leave the leave to leave the leave to leave the leave to leave the leave to leave the leave to leave the	bre and in oldered for obplied to	1 2 3 4		11056 11056 11056 11058 44776 Sightfure of pres	Overpayment trodit applied to install ment (c)	Jee. I through the installment data shown.Add (b) and (c)	No ps and bolist 3/18/72
o if en vous de la constant de la co	Amended Co stimuted tax is substantis ther filed.) ad entimated tax is substantis ad entimated tax (Ehref hi A on declaration-voucher sort of last year's overpayment to 1972 estimated bar end sorts made on 1972 declaration of Rees 2(a) and 2(b) belonce (film 2 to be paid (films 3 divided smalning installments, (Er line 1 of declaration-vou  Your signature here	bre and in oldered for obplied to	Total Date		11056 11056 11056 11058 110.58 44776 Significant of pro-	Overpayment trollis applied to installment (c)	Jee. I through the installment date shown.Add (b) and (c)	No ps and bolist 3/18/72

## FILE COPY

	e In	name and initial (if joint ratum, are first names and middle initials of both)  Christ & Botty J.		Your	social security number	•
	5 -	unt home address (famber and street or mrst route)	Steinle, Jr.	.		
	Ĕ	12224 Loral	m Auni	Spor	ze's social security um	mbe
	3, 50	town or post office, State and ZIP code	ni uan.	<u> </u>	Yours HR Cond	her
	É	Claveland, Ohi	io 44111	Oceu- pation		_
	F	ing Status—check only one:	Exemptions Regular / 6	er nu	er / Blind	T
	. 1	Single; 2 Married filing Jointly (even World one)	7 Yourself	n	er/Billing Enter	
_	13	Married filling separately and spouse is also filling.  If this item checked give spouse's social security number in	H Spouse (applies only if Hem)	Ď		
	- 1	Space andve and enter	9 First names of your dependent r	hildrei	n who lived with	Ţ
	a	first name here  Unmarried Head of Household	you Christ 3rd Thomas	, U	eniel Enter	-
		☐ Surviving widow(er) with dependent child	20 Number of other dense dense		number	•
		Married filing separately and spouse is not filing	10 Number of other dependents (fro 11 Total exemptions' claimed	. *	34)	]-
		1. May 1. Mar . (3 obstance ) received a cod as	Fines at the increase of the state of the state of	<del></del>	inh histopoleus	+
	1.	12 Wages, salaries, tips, etc. (Attach Forms W-2 to b	ack. If unavailable, attach evolunation	12	1	6
		The street was a second of the	and the control of the state of the control of the	) ::	dignounelle:	1
	1	13a Dividends (and 8 of insir.) \$13b less		130	-O-	
4	و ا	(Also list in Part I of Schedule B, if gross dividends and other	r distributions are over \$100)		50110 min .	Ι
/3	Incom	14 Interest. Enter total here (also list in Part II of Sc	chedule B, if total is over \$100) 🚎 🚜	14	17	Ľ
T	Ĕ	15 known other than sugar albitation at the	ing and a second control of the second contr	1	3.823	
8888		15 Income other than wages, dividends, and interest	t (from line 40)	25	sateque poble	╀
X.		16 Total (add lines 12, 13c, 14 and 15)	The second second section of the second	16	8,698	1
			The state of the s	1 250	6 78 Hirony	t
÷		17 Adjustments to income (such as "sick pay," mov	ing expense, etc. from line 45)	17	31111-1-15 <b>-0-</b>	1
				,	7 431 and	Ī
•	See ;	1B Adjusted gross income (subtract line 17 from line ) age 2 of instructions for rules under which the IRS will fig		18	8,698	Ľ
5		do not itemize deductions and line 18 is under \$10,000 itemize deductions or line 18 is \$10,000 or more, go to li			Artis Artista Artis	ı
		19 Tax (Check if from: Tax Tables 1-15 [], Tax Rate Schedule	TE 40 to tigure tax. X Y ng 71時 Schadulo D ロ ng Schadulo C ロロ	19	574	
	2 2	20 Tax surcharge. See Tax Surcharge Tables A. B. and	C in instructions (if you obline ration		3 7 7	Γ
	ax and	ment income credit, use Schedule R to figure su	rcharge.)	.20	3 1314	L
	E'S	21 Total (add lines 19 and 20)	The state of the territory and the factor	2 ,73	n ta)ot ytel <b>586</b>	١,
-	1.5	en application of the state of the fact of the state of t		21	Alabara Milata	H
	3.7	22 Total credits (from line 55)	Late of the tree of the Ptenit	22	, ( X •) <b>O</b> -	l
•	ম					H
5	Credits	23 Income tax (subtract line 22 from line 21)	• • • • • • • • • • • • • •	23	********** <b>586</b>	0
			edit (attech Schedule i)	2 . 4	e jeament inci	Γ
•	and	24 Other taxes (from line 61)	ere e e e e e e e e e e e e e e e e e e	24	::::::::::::2 <b>64</b> ;	
•		25 Total (edd lines 23 and 24)	grade and a control of the state of the stat		DED ACT AND TODAY	Ι.
	ភ			25	eta eta eta eta eta eta eta eta eta eta	777
	Tents	26 Total Federal Income tax withheld (attach Forme W.	-2 to hack)   26   436   70	Minn	In Abrah	07
	ауments	26 Total Federal Income tax withheld (attach Forms W-	-2 to back) . 26 436 70	<b> </b>	he check or mone or payable to inte	150
Consom :	Pауments	26 Total Federal Income tax withheld (attach Forms W- 27 1970 Estimated tax payments (include 1969 overpayment allow 28 Other payments (from line 65).	-2 to back) .   26   436   70   27   28	ord	ler payable to Inte Revenue Service	e.
Consom :	Payments	26 Total Federal Income tax withheld (attach Forms W- 27 1970 Estimated tax payments (include 1969 overpayment allow 28 Other payments (from line 65)	ved as a credit) 27	ord	ler payable to inte	e. 22
form to want	.:	26 Total Federal Income tax withheld (attach Forms W- 27 1970 Estimated tax payments (Include 1969 overpayment allow	ved as a credit) 27 28	ord	ler payable to Inte Revenue Service ((((((((((((((((((((((((((((((((((((	æ. ////
Canada de la constanta de la c	.:	26 Total Federal Income tax withheld (attach Forms W- 27 1970 Estimated tax payments (include 1969 overpayment allow 28 Other payments (from line 65)	red as a credit) 27 28 20 20 20 20 20 20 20 20 20 20 20 20 20	ord nal	Revenue Service	7
Ceriow to wante	.:	26 Total Federal Income tax withheld (attach Forms W- 27 1970 Estimated tax payments (include 1969 overpayment allow 28 Other payments (from line 65). 29 Total (add lines 26, 27, and 28). 30 If line 25 is larger than line 29, enter BALANCE D	yed as a credit)  27  28  28  27  28  28  27  28  28  28	ord nal 29	er payable to inte Revenue Service ((((((((((((((((((((((((((((((((((((	7
SO SHIRES CHOCK OF MORIES	Bal. Due Payments or Refund	26 Total Federal Income tax withheld (attach Forms W- 27 1970 Estimated tax payments (include 1969 overpayment allow 28 Other payments (from line 65).  29 Total (add lines 26, 27, and 28).  30 If line 25 is larger than line 29, enter BALANCE D 31 If line 29 is larger than line 25, enter OVERPAYM	ved as a credit)  27  28  Credit many nature.  UE. Pay in full with return.	29 30	Revenue Service	7
riesse ettech check of Money Order	.:	26 Total Federal Income tax withheld (attach Forms W- 27 1970 Estimated tax payments (include 1969 overpayment allow 28 Other payments (from line 65). 29 Total (add lines 26, 27, and 28). 30 If line 25 is larger than line 29, enter BALANCE D 31 If line 29 is larger than line 25, enter OVERPAYM 32 Line 31 to be: (a) Credited on 1971 estimated tax	yed as a credit)  27  28  credit may only a cred	29 30	er payable to Inte Revenue Service delication of the Addition	7
Tiess stratu cinex of Monsy	.:	26 Total Federal Income tax withheld (attach Forms W- 27 1970 Estimated tax payments (include 1969 overpayment allow 28 Other payments (from line 65).  29 Total (add lines 26, 27, and 28).  30 If line 25 is larger than line 29, enter BALANCE D 31 If line 29 is larger than line 25, enter OVERPAYM	yed as a credit)  27  28  credit may only a cred	29 30	ler payable to Inde Revenue Sendece 436 416	7

Inc	ome Ta	X Return 1970, endin	٧ ٧	1970 19 19 19 19 19 19 19 19 19 19 19 19 19 1
St.	eimle, Jr.		Your social so	curity number
<del></del>				
	VB,			a) security number
h10 4	44111		VIII.	RR Conductor Bike Shop P
)   7		· · · · · · · · · · · · · · · · · · ·	/65 or over/Bli	nd Enter number of boxes checked 2
•.				
Keep	for your re	ecords— <b>Do</b>	not file)	
سررع	LE-VR		Sect	Security Number
				869844
	WAGE	AND TAX S	TATEMENT	1970
d ove.		· ·	:	
i	SOCIAL SEC	URITY INFORMATIO	N STAT	E & LOCAL
penso-		.,	1	, withing to
		<u>គ្</u> នៃក្រុមប្រជា	10 M	
	(Not sub	ect to F. I. C. A.)		348 47
4 C 0, C	Includes to	ps reported by em	playee. Amount is	before pay
'.				be reported
395	as wages and se	laries on your incom	e lox return.	
539	:			
,,,	:			
	Uncollected Empl	over Tox on Tips	\$	
	1 1			
(04)	SR)   U.S.	Ireasury Department, k	nteraal <b>Mevellul Serv</b> i	CCUT HINT ES
· · · ·	on onginal de	claration-vouch	er. If zero,	101.12
	Record	of Estimated	Tax Paymen	
Vouch	Data		1970 everpeyment	Total amount pold and credited from
nomber			in imteliment	Jen. 3 through the Installment data shown. Add (b), and (c)
1	(b)		(c)	
2	-		i arag	4 LUPP
3		101.14	YBIL	
4				
<u>-</u>	<u> </u>	101.14	<del></del>	
	• • • •	40450		1
tach her	•			<u></u>
		·	)	standard s
ala	Sientium o	property other than	Mesle	3/6/71
· .			A promised to	Date
	Keep  C/M  Senso- 1970  4 COC  3 9 5 9 9  (OVI  Item 2	Keep for your re  CIM LE - VR  WAGE  WAGE  (Not sub)  I Includes heil deductions of 2 Add thin it on wogen and so 3 9 Uncollected Empl  Uncollected Empl  (OVER)  Uncollected Empl  Record  Voucher homber  (a)  1  2  3  4  Otal  Lach here	A Supplies only if Rem Da Record of Estimated Pocher Policy of Policy on Policy of Pol	Keep for your records—Do not file)  WAGE AND TAX STATEMENT  Copy C-For employee's records  Social SECURITY INFORMATION  Includes hips reported by employee. Amount is roll deductions of sich pop exclusion.  Add this item to wager in figuring the amount to ap wagen and soluties on your income tox return.  Wage End of Estimated Tax Paymen  Uncollected Employee Tax on Tips  Record of Estimated Tax Paymen  (b)  Line Amount 1970 representation—Voucher. If zero.  Record of Estimated Tax Paymen  (c)  1 101.17

NO. 34 6000723 OFFICE OF DISTRICT AUDITOR OF EXPENDITURES	WAGE AND	TAX STA	TEME	<sup>nt</sup> 1967
*** KUUM YUZ, MICHIGAN CENTRAL TERMINAL RIPHDING	• .			
DEIRUH, MICHEGAN 48216	•	Copy C-F	or emp	loyee's records
Type or print EMPLOYER'S identification number, name and address above.	FO		-	Internal Baranua Servica
. HOTERAL INCOME TAX INFORMATION MODERAL INCOME TAX INFORMATION OTHER COMPENSATION	SOCIAL SECURITY IN		STATUS 1. SINGLE	GROSS WAGES FOR STA
WITHFOLDING IN 1967 PAID IN 1967	TAX YMTHRELDS	PART MI GIAT	7. MARBED	IN DITTERENT BOW LEDS
NONE 366 60	NONE	NONE	2	•
ype of print EMPLOYEE'S	NAME OF STATE	STATE FORM NO		DEHHIN KAT BEAT
288   22   4006	· ·			
The second secon	HAME OF CITY	CITY FORM NO.		OFF TAX WITHHELD
			. : 1	
C / STEINLE JR	* EXCLUDABLE SICK PAT	<del></del>		
12224 LURAIN AVE	"UNCOLLECTED EMPLOYEE	1		
CLEVELAND OHIO	I lodge to record by and our	his amount is before payer	م ومواجاة الا	seb pay" archaion.
	"Add this item to seges to Equipment the said security (F.E.C.) sere of E.	Me several to be reported.	d as wages and Insurance Beaution	salaries on your income too re-
THE CLEVELAND UNION TERMINALS COMPANY NO. 34 6000723	sounder the should pl adjoker	Il Lon mail or made triplated	la doniel annida	linen hat one set these free se
NO. 34 6000723 OFFICE OF DISTRICT AUDITOR OF EXPENDITURES ROOM 907, MICHIGAN CENTRAL TERMINAL BUILDING		) TAX STA	ATEME	NT 1967
NO. 34 6000723 OFFICE OF DISTRICT AUDITOR OF EXPENDITURES ROOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216	WAGE AND	TAX STA	TEME	NT 1967
NO. 34 6000723 OFFICE OF DISTRICT AUDITOR OF EXPENDITURES ROOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216  Type or print EMPLOYER'S identification number, name and address above. ROWAL INCOME TAX INFORMATION	WAGE AND	TAX STA	TEME	NT 1967
NO. 34 6000723 OFFICE OF DISTRICT AUDITOR OF EXPENDITURES ROOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216 Type of print EMPLOYER'S identification number, name and address above.	WAGE AND	Copy C	TEME	NT 1967
NO. 34 6000723 OFFICE OF DISTRICT AUDITOR OF EXPENDITURES FOOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216  Type or print EMPLOYER'S identification number, name and address above.    HOWALD COMPLETE   MACEUTED   OTHER COMPLETATION	WAGE AND	Copy C-	TEME	NT 1967
NO. 34 6000723 OFFICE OF DISTRICT AUDITOR OF EXPENDITURES ROOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216  Type or print EMPLOYER'S identification number, name and address above.  HERMAL INCOME TAX INFORMATION WISTON WISTON 1920 PAID IN 1920 PAID IN 1920 PAID IN 1920 PAID IN 1920 PAID IN 1920 PAID IN 1920	WAGE AND	Copy C	TEME TO emp To Department STATUS 1. STATUS 2. MARRIED	NT 1967
OFFICE OF DISTRICT AUDITOR OF EXPENDITURES  ACOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216  Type or print EMPLOYER'S identification number, name and address above.  FROMAL INCOMIT PRINT INFORMATION  HOBBAL BROALE TAR WAGEE PARD SUBJECT TO OTHER COMPLETATION  WITHOUT AND THE COMPLETATION  ACCEPTAD SUBJECT TO OTHER COMPLETATION  2621, 26	WAGE AND SOCIAL SECURITY B FIGURE AND SOCIAL	Copy C ROMATION ONATION NONE	TEME TO emp To Department STATUS 1. STATUS 2. MARRIED	NT 1967 loyee's records Labored Bereaus Service GROSS WAGESTON EN
OFFICE OF DISTRICT AUDITOR OF EXPENDITURES  ACOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216  Type or print EMPLOYER'S identification number, name and address above.  FROMAL INCOMETRA INFORMATION  HEDMAL BROWLET TALL WASTER PROSMUTED OTHER CONVENSATION  WITHOULDING IN 1967  Type or print EMPLOYER'S  Type or print EMPLOYER'S	WAGE AND SOCIAL SECURITY B FIGURE AND SOCIAL	Copy C ROMATION ONATION NONE	TEME For emp y Department 13/10/1 1. SANGE 1. MARRED	NT 1967 loyee's records Labored Bereaus Service GROSS WAGESTON EN
NO. 34 6000723  OFFICE OF DISTRICT AUDITOR OF EXPENDITURES POOM 907, MICHIGAN CENTRAL TERMINAL BUILDING  DETROIT, MICHIGAN 48216  Type or print EMPLOYER'S identification number, name and address above.  HEDBAL INCOMETAR WAGELY FAND SUBJECT TO WITHOUT HEDBAL INCOMETAR INFORMATION WITHOUT HEDBAL INCOMETAR INFORMATION WITHOUT HEDBAL INCOMETAR INFORMATION WITHOUT HEDBAL INCOMETAR INFORMATION PAID IN 1967 PAID IN 1967 PAID IN 1967 PAID IN 1967 PAID IN 1967 Social security number  288 22 4006	WAGE AND  SOCIAL SECURITY F  JICAL EMPORE  TANHERITY  NONE	Copy C	TEME For emp y Department 13/10/1 1. SANGE 1. MARRED	NT 1967 loyee's records Labored B resource Service GROSS WACES TOR SIA STATE FAR WITHHERD
OFFICE OF DISTRICT AUDITOR OF EXPENDITURES FOOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216  Type or print EMPLOYER'S identification number, name and address above.  **ROWAL INCOME TAX PROGRAMATION**  **MONETO**  **PROPRIEM IN 1967  **PAID IN 1967  **Type or print EMPLOYEE'S  **social security number**  **Z621, 26  **Type or print EMPLOYEE'S  **social security number**  **Z88 22 4006	WAGE AND  SOCIAL SECURITY FOR THE PROPERTY OF	COPY C	TEME For emp y Department 13/10/1 1. SANGE 1. MARRED	NT 1967 loyee's records Lineard Burner torribe GROSS WAGES FOR BI STATE TAX WHITHHED CITY TAX WHITHHED
OFFICE OF DISTRICT AUDITOR OF EXPENDITURES FOOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216  Type or print EMPLOYER'S identification number, name and address above.  **ROWAL INCOME TAX PROGRAMATION**  **MONETO**  **PROVIDENCE TO WITHOUSE IN 1947  **PAID IN 1867  **P	WAGE AND  SOCIAL SECURITY IN  1.1.C.A. LAWGOTEC  TAX WITHHELD  NONE  NAME OF SIATE  NAME OF SIATE  CLEVE LAND  - EXCLUDANT SICK PAY  "UNCOLLECTIO SAPLOYEE	COPY C	TEME For emp y Department 13/10/1 1. SANGE 1. MARRED	NT 1967 loyee's records Lineard Burner torribe GROSS WAGES FOR BI STATE TAX WHITHHED CITY TAX WHITHHED
OFFICE OF DISTRICT AUDITOR OF EXPENDITURES FOOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216  Type or print EMPLOYER'S identification number, name and address above.  **ROWAL INCOME TAX PROGRAMATION**  **MONETO**  **PROPRIEM IN 1967  **PAID IN 1967  **Type or print EMPLOYEE'S  **social security number**  **Z621, 26  **Type or print EMPLOYEE'S  **social security number**  **Z88 22 4006	WAGE AND  SOCIAL SECURITY BY  J.I.C.A. LANGUICE  TAX WITHHELD  NONE  NAME OF STATE  CLEVELAND  -EXCLUDANCE SICK PAY  "UNCOLLECTIO LANGUICE TO AN OPH 185  TAX ON 185  TAX ON 185  TAX ON 185	COPY C	TEME For comp y Department 1 SINGS 2 MARRIED 2.	NT 1967 loyee's records Library Bursaus Borbs CROSS WAGES FOR BLO GUITTEN FOM FLOO STATE SAR WATHHED 11 1 1
OFFICE OF DISTRICT AUDITOR OF EXPENDITURES FOOM 907, MICHIGAN CENTRAL TERMINAL BUILDING DETROIT, MICHIGAN 48216  Type or print EMPLOYER'S identification number, name and address above.  **ROWAL INCOME TAX PROGRAMATION**  **MONETO**  **PROVIDENCE TO WITHOUSE IN 1947  **PAID IN 1867  **P	WAGE AND  SOCIAL SECURITY B  FI.C.A. EMICHE  TAX WITHHELD  NONE  NAME OF BIATE  NAME OF BIATE  CLEVELAND  *EXCLUDANTE SICK PAY  "UNCOLLECTIO LIMPOTEE  TAX ON 185	COPY C	TEME TO comp To portman  STATUS  MARRIED  To de suspan ou	NT 1967 loyee's Fecords Libertal Breant Service GROSS WAGES FOR THE STATE TAX WITHHELD LITTLE AND MINISTER

	PENN CENTRAL COMPA OFFICE OF REGIONAL I ROOM 907 MICHIGA DETROIT, MICHIGAN 41	OMPTROLLER N CENTRAL TE 1216	RMINAL B	LDG.	WAGE AND				U
. V.	Type or print EMPLOYER'S	identification m	ımber, nomo	and address above.	FORM			Internal Bosones Sor	274
	FEDERAL BACOME TALL WITHHELD	WAGES PAID SI WAGES PAID SI WITHHICKDONG	UB/ECT 10	OTHER COMPENSATION FAID IN 1948*		IMATION LEFICA WACES PAID IN 1968	STATUS 1. SINGLE 2. MAIDED	GROSS WAGES FO	
	42, 72	3,88	105	e de Tilla	NONE	NONE	2		1 1
je.	Type or print EMPLOYEE'S social security his	mber →	288	22 4006	NAME OF STATE	STATE FORM NO		SIATE TAX WITHING	}
70	ermanas lindväsikui skieta gargiish on isa kiit balii likus selliparii yahadiphilis	Rate on Street		lander († 1905) 1908 – Propinsk State 1907 – Propinsk State	NAME OF CITY CONTROL OF THE PROPERTY OF THE PR	CIT FOUN NO.		CITY TAX WITHOUTED	
727 884	12224	STEIN			* EXCLUDABLE SICK PAY  "UNCOLLECTED EMPLOYEE  TALLON BUS	••	7 <del>- 1</del> 1 1 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Earth Nys F	
	Type or print EMPLOYEE'S	LAND CH		. 7IP code) above	*Include for reported by analogos. Air *Iddd fibe Dwn to weger to Equating the This mind security (FLCA) into all All doubthy incurrence: *Includes tips reported by analogos. Bit are the geome at weight shows under To goe the geome at weight shows under To	e amount to be report includes ATL for Mespile pur weger were schies	of so wages and I transcess Base to testion security	d palartes en peut lessess éts cord 3.8% les aldrage, le surre, les are not alaren, l	

•		3-60007&5	WAGE AND TAX ST	ALMENI 1969
	ROOM 813, 15 NORTH 32nd STREET, PHILADELPHIA, PA		Copy C-For emp	
	Type or print EMPLOYER'S identification number, name, a			
	FEDERAL INCOME TAX INFORMATI	Oher compenso-	SOCIAL SECURITY INFORMATION	STATE L LOCAL JAXES WITHHELD
1	withheld	tion poid in 19692		
	国际企业 经基础 经增加的			
ļ	Type or print EMPLOYEE'S social security number		(Not subject to F. I. C. A.)	\$22.80
		8-22+4 CO6	foliations or sick pay exclusion.	
•		0-2274006	2 Add this Item to wages in figur	
í	C STEINLES	629895	as wages and salaries on your income	fan setum
	12224 LORAIN A	620 539		
	CLEVERAND OHIO			
	Type or print EMPLOYEE'S name and address (including 2		Uncollected Employee Tax on Tips	
i	FORM W-2 - U. S. Treasury Department, Internal Revo	enue Service	e Kontraktion of the State of t	1
	6 T 4 9 T	<u></u>	Ar Bresenia in the	and the same and t
	PENN CENTRAL TRANSPORTATION COMPANY,		WAGE AND TAX STAT	EMENT TOTA
	23-i ROOM 815, 15 NORTH 32nd STREET, PHILADELPHI.	6000765	MACE WILL THE STATE	rwen 14/0
	Type or print EMPLOYER'S identification number, name, an		Copy C-For employee's r	ecords chiling
:	FEDERAL INCOME TAX INFORMATIO	W.	SOCIAL SECURITY INFORMATION	STATE & TOCAL
	Federal income tox Wages paid subject to with- withheld holding in 1970'	Other compensa- tion paid in 1970 <sup>2</sup>	1	TAKS WITHING
		non paid in 1770	of the last state of the state	W Constitution
	\$436.70 Pay dem \$4848.13		(Not subject to F. J. C. A.)	\$46.47
: j	Type or print EMPLOYEE'S social security number	288-22-4000	Includes tips reported by employe	c. Amount is before pay
'			rall deductions or sick pay exclusion.  7 Add this Hern to wages in figuring.	
1	CARTEINLE	029395	as wages and salaries on your income last	
	1222 LORAIN A	320 539		
	CLEVELAND: 187 DHIO	44111		
	Type or print EMPLOYEE'S name and address (including ZIF	P sode) phone	Man Bart of Cartain V. T.	
ŀ	FORM W-2 - U. S. Treasury Department, Internal Roven		Uncollected Employee Tox on Tips	••••
٠	The second secon	NO SERVICE		Sala diniberah
ı	shown, please furnish the correct number for this account t	to the payer. (OV)	CR) U.S. Treesury Department, Interns	REVERSE ENTRE TOTAL TO
	· · · · · · · · · · · · · · · · · · ·		والمستري فلنتها والمسترين والمسترين والمسترين والمراوا والمستر والمسترور المسترور والمسترور والمسترور والمسترور	ئەرسىن ئىمۇسىمەنتىنەنىدە سىدە ئىلىلانىد 
				1071
. '	PENN CENTRAL TRANSPORTATION COMPANY, D 23-64	DEBTOR 000765	WAGE AND TAX STATI	MENT 19/1
	ROOM 215, 15 NORTH 326d STREET, PHILADELPHIA, P	A. 19104	Copy C-For employee's re	cords
ŕ	CERTAL INCOME TAY INCOMATED	<del></del>	SOCIAL SECURITY INFORMATION	STATE & LOCAL
-	FEDERAL INCOME TAX INFORMATION Federal income tax	Other compenso-	July 10 to 1	TAXES WITHHELD
	withheld holding in 1971!	tion paid in 1971?		
	1361.19	* \$ 13 L	(Not subject to F. I. C. A.)	\$42.18
	Type at print EMPLOYEE'S social security number		I includes tips reported by employee	Amount & before pay
	288	-22-4006	roll deductions or sick pay exclusion.	
:	C STEIMEE	629895	2 Add this item to wages in figuring as wages and salaries on your income tax	
				<del></del>

11	PENN CENTRAL TRANSPORTED 325	23-	6000765	WAGE AND	TAX STATEMENT 1972 employee's records:	makening to private
	PEDERAL INCO	METAX INFORMATION	er Compensation?	SOCIAL SECURITY INFO		OTEE TAX ON TIPS
£1.	A TOP OF SERVICE	Withholding in 1972	Pald in 1972			:
ti 🖰 😅	·····	233.58	NAME OF S	TATE OR CITY		GROSS TAXABLE WAGE
	OCIÁL SE CURITY HUMBER	288-22-4006		LAND CLTY	OH	4233.58
		320 539 62989	\	<del>- 3 </del>	मुक्तम है के के स्टूट र 🗱 💎	TAX WITHHELD
	STEIMLE	keeds likely modern.	A 91 200		- White terms - I as I a	41.2L.
	(SEA) COMBINE			11 0	1	GROSS TAXABLE WAGE
C	LEVELAND	num eerri	JOH LO	Art On Cilt		3912.62*
•	्राध्ये <b>सर्वा</b> कृति । सम्बद्धाः स्थान		Untu	The second secon		TAX WITHHELD
					State of Marketine Co.	14.14
				18 E121 8		14 42 4 5 T. B. J. T.
	PENN CENTRAL TRANSPOR	: TATION COMMANY DE	neón :	Type or print	Wage and Tax State	ment 197
• •	LEMA CEMIKAT MAMALOK		00765		Copy C for employee's recer	10
•	ROOM 215, 15 NORTH 32mg		PA. 19104	identifying number, name, address and ZIP code	The state of the s	
: 0	FEDERAL INCOME  1 Federal Income 1:	TAX INFORMATION			E DR. CITY INCOME TAX INFORMATION	
ېن	496.61	5929.9	1 .	Name of State or City VELAND CITY		6. 1: 1= with 0H 59.3
		3,2,36,7	A CLL	ICENTO CIT		77 Toroble we
T'	EMPLOYEE'S sadd serving number.	288-22-40	C6   '	I++ tas	n in travers age (1) dependent.	5929.9
1		320 539		Name of State or City	Laster Control	9 . Je Tax within
	L STEIMLE		OHÍ			28.4
	12224 LORAIN A					10 Touble w
				out of group form life stance included in box 2	Polocation included in box 7	
<b>X</b>	At the m	and the second of the second of	حجزا	monce included in box.2 .	relimbursement (II) applicable	Excludable slet pay included in box I
Y				If this is a co	rrected form, put on "X" in the apper is	off corner.
į į				form W—2	Department of the Treozury-Internal Bo	ovenege Service
· 1	Type or pulse EMPLOYEE'S now	ne address and IIF code above				
	THE STATE OF THE S			<del></del>	<u>• • • • • • • • • • • • • • • • • • • </u>	
			•	Tunn or oriot	Wage and Tax State	ment 107
	PENN-CENTRAL TRANSPOR	TATION COMPANY, DE 23-60	BTOR DOZAS	Type or print EMPLOYER'S identifying number, name; address		u u u
: .		STREET, PHILADELPHIA,		and lik tode	Copy C for employee's recor	01
	RCXXXX 215. 15 NOXIM J2NO					
		TAX INFORMATION .	1	STAT	E OR CITY INCOME TAX INFORMATION	
	ROOM 215, 13 NORTH 32NO		8 1	STAT	E OR CITY INCOME TAX INFORMATION	
	FEDERAL INCOME		•   - •			6. Tox withh
	Dept 19 Find the State of Stat	2 Woom to ord 6256.75	s cre	Name of State or City		6 Tax with
	FIGURE Special Security members 1	2 Women for our first our factor of the components of the componen	CA CLE	Name of State or City VELAND CLTY		6 Tax within 62
	FORMER POSSESSION OF THE PROPERTY OF THE PROPE	2 Woom to one 6256 . 75	CA III	Name of State or City VELAND CLIY Name of State or City		6 Tax with
	500-55  EMPLOYEE'S bedd in why minhous bologies Bologies (2000) and the bologies of the bologies (2000) and the bologies (2000	2 Woom to one 6256 . 75	CTE,	Name of State or City VELAND CLIY Name of State or City		6 Tax within 62
	500-55  EMPLOYET'S beded income and a policy of the policy	2 Moon to one of the constraint of the constrain	CAE	Name of State or City FLAND CLTY Name of State or City		6 Ton withhum 62 62 62 62 62 62 62 62 62 62 62 62 62
And the second s	SOU-55  EMPLOYEE'S bedd incurry minher be obliged by the bedd incurry minher be obliged by the bedding by the b	286-22-400 286-22-400 320 535 320 535	CAE	Name of State or City VELAND CLIY Name of State or City		6   Ton withham   62   7   Haspile set   62   50   1   1   1   1   1   1   1   1   1
	SOURCE PRODUCTION OF THE PROPERTY OF THE PROPE	286-22-400 286-22-400 320 535 320 535	CLE OHL	Name of State or City  FLAND CLTY  Name of State or City  Cost of group seem the consense included in box 2		6 Ton within 62. 7 Tongolo year 62.56. 79 Ton within 27. 10 Tongolo we 62.56.

er en en en en en en en en en en en en en			vvage and	10x 21016	mens [8/0
ROOM 215, 15 NORTH 32	ORTATION COMPANY, DEBYO 23-600070 nd STREET, PHILADELPHIA, PA	55	Type or print EMPLOYER'S name, address, ZIP code and Federal Identifying number.	A Was employe	opy Cifor layer's records
Employee's social security number 288-22-4006	1: Federal income tox withheld	2 Wages, tips, and other compensations 9226-19	8 Cost of group term Die insurance included in box 2	C Below	ones included in box 2
Typé er print Employee's n	ome, address, and ZIP code below.		E OR CIFY INCOME TAX IF	SECRMATION.	
G STEINLE		Name of State or City OHIO			on withhold
12224 LORAIN CLEVELAND	DHIO 44111		<del></del>	1	9226.19
PC064005 62	9895 3200 539	Nome of State of City CLEVELAND CLT	Υ	ОН	os withheld
					9226.19
W-2	This information is being	furnished to the Internal Reve	nuo Servico. Dyanea	of the Treasury	-Internal Bassace Savice
	er or a few terms	a the second production of the second	Wage	and Tax Si	latement 1976
PENN CENTRAL TRAI	NSPORTATION COMPANY, DE 23-60 4 32nd STREET, PHILADELPHIA,	UU/03	lype or print AMPONER'S Acome, address IIP Code an Federal identifying another.	d A Wes so	Capy C For employee's records
Employee's social security number 28 i-22-4006	ing the leaders of the control of th	2 Wages, hip, and other temperation 2789.	B Cost of group harm to insurance included in	ile C box 2	Belocation included in hos 7 reimbursament If applicable
•	ee's name, address, and ZIP code below	,	STATE OF CITY INCOME T	AX INFORMAT	1010
g STEINLE	Note that the second of the second	Nome of State or City OHIO		-2 -3 -4-	Tou withheld 20 • (
12224 LIRAT	N-A	11			7 789.
CLEVELAND	CHIO 441				
CLEVELAND.	62-895 3200 5	139 CLEVELAND	CITY	(	)H 27-1

Knapik - Christ Steinle JR.

## THE NEWYORK CENTRAL RAILROAD COMPANY Steinle EMPLOYEE'S GROSS EARNINGS AND DEDUCTION INFORMATION YOU SHOULD CHECK THE CORRECTNESS OF YOUR SOCIAL SECURITY NO. SHOWN HEREON AND ADVISE THE OFFICE ISSUING IF IN ERROR 2258852

CONTROL ABST. NO.	NUMBER	EMPLOYEE IDENT. HUMBER	SOCIAL SECURITY NUMBER	GROSS EARNINGS	FEDERAL INCOME TAX	D E D U C	2 M O 1 I	IO(A) IN(OM) IAB	NET PAY	PAY PERIOD	E A R	
2914	18	9589	288224006	5325		433			4892	065	65	

	T									
INSURAN	CE MANIEY	UNION	N.Y.C.R.R. PAYABLES	UNION	WATCH ORDERS	BE,Y M, C.A. AND BOARD	STOCKS AND BONDS	10 10 E	MISC. ELLANEOUS	SETTLEMENT
-				DE	DUCTIO	) N S				

on lima

DETACH THIS STUB BEFORE CASHING PAY DRAFT

_13.	THE NEW YORK CENTRAL NO. 13 6001599 OFFICE OF DISTRICT AUD ROOM 907, MICHIGAN CE DETROIT, MICHIGAN 412	HTOR OF EXPENDITURES NTRALTERMINAL BUILDI 16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	HĠ	in an Altitution of the	ID TAX STA	y II adiq Ngga	HANDE IN COLUMN	ر
) post		identification number, name PALINCOME VAR INFORMATION WAGES! PAID SUBJECT TO WITHHOLDING BY 1967	OTHER COMPENSATIONS PAID IN 1967	FLCA EMPLOYEE TAX WITHOUTE	TOTAL FILCA WAGES*	STATUS 1. SINGLE 2. MARRIED	CROSS WAGES FOR STATE IF OUTERANT FROM FEDERAL	
t y <b>m</b> to a	Type or print EMPLOYEE'S social security non	2621; 26 nber -> 288	22 4006	NONE	ON AROT BIATE		OBHITIW ANT STATE	ٔ ب
2014) ***} ***	ing a Consequence of the con- man and consequence of the con- man and con- tage of the con- tage of the con-	A Company of the Comp		CLEVELAND	CITY FORM NO.	, i fi	CIT TAX WITHHEID	
•	122Z4 CLEVEL	STEIMLE LORAIN AVE AND OHIO		* EXCLUDABLE SICK PAP  **MINCOLLECTED EMPLOYEE  Take ON 1873  Take day top reported by employee  1 Add this from to voges to figure	sa. Dis proper is below pape		ich eren bereite der seine eren bereite der seinen eren bereite der seine bestehnt der seine bestehnt der seinen bestehnt der seine bestehnt der s	۳۳۳ اب
•	Type or print EMPLOYEE'S n	name and address (including	ZIP rode) above.	The serial security (F.E.C.) sery of disability inverses is included tips reported by simpleys are the series or inveger character	al & 1% induses .3% for Hospital in. If your wages were noticed	Improve Banada To social security	and 37% for old-sps, services, and	

****	and the property of		A CONTRACTOR OF THE PARTY OF TH	(coll income)		Light British
CLEVELAND Off	UNION TERMINAL LOS BURGES SAUNA PET MUNICIPAL CONT DETROIT MICHOL	of Jonathures rat Terminal Bldg.	10723	Federal Taxos With		1964
in EMPLOYES	5 landification numbe	e; name and address abo	re.	INCOME TAX INFORMATION		1
	SOCIAL SECURITY	INFORMATION		PARASTER STATE	Total Wages	
PAYROLL ABST, NO.	F.I.C.A. employee tax Withheld. If any	Potal F.I.C.A. Wages- paid in 1964	federal Income Tax Withheld, if any		poid in 1984	
- 34-	NONE	NONE	Jan 16, 150 000			
4915 C	C TOMO EAK		824	* MAINTAN	6 4 8 8 D at 3 5	housing towns, but are not
	ALO STANFI	ELO DR 3	91-10-505	MOTICE: If your worse whome, your Social Secur	its notes ore the role to	on \$4,800.
	ARNA 34 OH				opy on part of your	las records.
		utily account na., name, (		Keep was		
FORM W-2	U.S. Treasury Departm	ent, Internal Revinue Servic	marianant at the s	coyroll deductions or Trick po	ويتوارد والمراجع والم	App. 1.8.S. 623-64
FORM W-2	DRK CENTRAL RAII Office of Distrit Room 907, Mich	LROAD COMPANY, he Auditor of Expendituring	VO.13 60015	9 WITHHOLDING Federal Toxes V	TAX STATEM	in 196
FORM W-2	DRK CENTRAL RAII Office of Distri Room 907, Mich	LROAD COMPANY, it addition of Expenditural Services of Expenditural Ser	NO.13 6 0 0 1 5	9 9 WITHHOLDING Federal Toxes V	TAX STATEM	ini 196
FORM W-2	DRK CENTRAL RAII DIRCO of Distri Room 907, Mich DETROIT	LROAD COMPANY, in the Auditor of Expenditure in the Auditor of Exp	NO.13 6 0 0 1 5	9 WITHHOLDING Federal Toxes V	TAX STATEM	int 196
THE NEW YO	ORK CENTRAL RAII Office of Detail Room 907, Mich OYER'S identification in SOCIAL SECUI	LROAD COMPANY, it addition of Expenditural Services of Expenditural Ser	NO. 1 3 6 0 0 1 5 1	99 WITHHOLDING Federal Toxes V	TAX STATEM	ini 196
THE NEW YO	DRK CENTRAL RAII Office of Dichi Room 907, Mich DYER'S identification in SOCIAL SECU- F.L.C.A. imployee too. Withhald if my	LROAD COMPANY, he Auditor of Expenditurals, march 18 michigan Central Terminal Bit, MICHIGAN 48216 umber, name and address RELY INFORMATION	NO.13 60015	99 WITHHOLDING Federal Toxes V	TAX STATEM Withheld from Wo	ent 196 ployee's Reco
THE NEW YOU  Print EMPLO  AAVEOLE ABST. NO.	ORK CENTRAL RAII Office of Distri Room 907, Mich DETROIT OYER'S identification in SOCIAL SECUL F.I.C.A. imployee too Wishhald if my	LROAD COMPANY, her Auditor of Expenditurning an Central Terminal Bi, MICHIGAN 48216  JANCHIGAN 48216  JOHN STATE FLICA. Wage poid in 1964  S NONE	NO.13 60015	WITHHOLDING Federal Toxes V	TAX STATEM Vishheld from Wo V.—For Em Ion Latel Wogan poid in 1964	ent 196 ployee's Reco
Print EMPLO	ORK CENTRAL RAII Office of Distri Room 907, Mich DETROIT OYER'S identification in SOCIAL SECUL F.I.C.A. imployee too Wishhald if my	LROAD COMPANY, Not Auditor of Expenditure in the Auditor of Expenditure in the International Bit, MICHIGAN 48216 umber, name and addies not in 1964  S. INONE NONE	NO. 13 & 0 0 1 5 4	WITHHOLDING Federal Toxes V	TAX STATEM Vishheld from Wo V.—For Em Ion Latel Wogan poid in 1964	ent 196 ployee's Reco
FORM W-2.  THE NEW YO  Print EMPLO  PAYTOLE ABST. NO.  2914	DRK CENTRAL RAII DIRCO of Distri Rooms 907, Mich DISTROIS SOCIAL SECUI F.I.C.A. ampiopre tos Withhald if my  SOCIAL SECUI F.I.C.A. for proper tos Withhald if my  SOCIAL SECUI F.I.C.A. ampiopre tos Withhald if m	LROAD COMPANY, Note Auditor of Expenditure signs Centrel Terminel Bit, MICHIGAN 48216 umber, name and addies noted in 1964  I Total F.I.C.A. Wage poid in 1964  I NONE COMPANY NO COMPANY NO COMPAN	100.13 6 0 0 1 5 ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° °	WITHHOLDING Federal Taxes V  Cop INCOME TAX INFORMAT  NOTICE: # your won Thompson Second TO COME TAX INFO  Responses to the control of the co	TAX STATEM Vishheld from Wo V.—For Em Ion Latel Wogan poid in 1964	ployee's Reco

THE N. Y. C.R. R. CO. 13-6001599 WAGE, AND, JAX, STATEMENT OFFICE OF DISTRICT AUDITOR OF EXPENDITURES ROOM 907 MICHIGAN CENTRAL TERMINAL BLDG Copy C For smalloyee's records
Keep this copy as port of your toly scotter DETROIT, MICHIGAN 48216 MO IN 1843 196 32 1402 14 NONE Type or print EMPLOYEE'S 391 10 | 5053 C C TOHCZAK 2419 STANFIELD DR beine period debutiges on talk pay unknown.

The black merked Order representation in for use in aggressing solars, or other companies on not subject to withholding and which were beverfore reported on form 1079.

Add the item to wropes in flighting the amount to be reported on wopes and subjects. PARMA 34 OHIO Type or print EMPLOYEE'S name and address above

34 6000723 THE CLEVELAND UNION	N TEOMINALO	Control of the second
OFFICE OF DIST. AU	DITOR OF CO.	WAGE AND JAX STATEMENT 1085
EXPENDITURES ROOF		
BELROIT, MICHIGAN Type or print EMPLOYER'S identification number	48216	Copy C. /For purpleyed a records  Keep bit copy of port of your for Records.
HICOM TAX PUREL	MECT TO OTHER COMPORATIONS	ACCAPACITE TOTALLICA VANCES IN SACE STATE SACE STATES
630 97 5326	19709 11 - 19 <b>2</b>	NCNE NONE 2 MORE
	391 10 5053	The second secon
T.C. TOHCZAK		AND AND AND AND AND AND AND AND AND AND
2419 STANFIBL PARMA 34 ONTO	5. DR	property of the control of the contr
Secretaria de la companya del companya de la companya del companya de la companya	1986 on other graphs and agent Association of the control of the c	My Date by supply to figuring the amount by by opported on separate and interference your behavior of the control of the contr
Type of print EMPLOYEE'S name and address	obove	on the same of mediar shows wide "hume las laboration," has not more than \$4.00.

THE B. Y. C. B. R. C 13 6001599	
MICHIGAN GENTRAL TERMINAL BLDG	WAGE AND TAX STATEMENT 1966 TO MEN
Type or print EMPLOTEES diministration number, nome and orders above.  **Commission number name of the programation of the pro	
294 61 294 61 391 10 5053	MONE NONE
C C YONCZAK 2669 STANFIELD OR PARMA 34 OHIO	SATE WANT COT TAX WE WANT OF A SECOND COT TAX WE WANT OF TAX WE WANT OF TAX WE WANT OF TAX WE WANT OF TAX WE WANT OF TAX WE WANT OF TAX WE WAN
Type or prid EMPLOYEE's name and uddress return  Observis Oik Trimony Disjustance, when not by some breed	And the face to require the princip the research to transmit as supposed solvers or one income to the other of the property was solved by the property was solved by the property of the prope
34 6000723	و و و و و و و و و و و و و و و و و و و
THE CLEVELAND UNION TERMINALS OFFICE OF DIST. AUDITOR OF CO EXPENDITURES ROOM 907 MICHIGAN CENTRAL TERMINAL BLDG	wage and tax statement 1966
DE INCLUMENTATION AND AND AND AND AND AND AND AND AND AN	Copy (-for employee's reverds  Keep this tupy of port of your ten records.  Fig. 1 (and 77).  Total professional formation of the second of th
1286:62 8709 35 i	NONE NONE NONE
C.C. TBMCZAK 2119-STANFIELD DW	FOUNDATION OF PO
PARMA 34 DHEO	This gas a few seasons are sensitively as the season of th
Total Andrews Department Name of States Service	
CONTROL DATA BRANCH CONTROL OF THE BRANCH DATA CONTROL OF THE CONT	WAGE AND TAX STATEMENT 1967
TYPE OF THE EMPLOYEE S. rice philippines number, name and address above	Copy C. for employee's records
769:43 3726 (80	NONE NONE 2
391 (10 !5053	OF CASE COST SOON SOON CASE AN ANSWERD TO CASE OF CASE
	NOMES SEED TO THE CONTROL OF THE CON
Type to proje EMPROFEE'S name and address (netuding ZIP code) above	The second of the second of the register of the second of
JTE CEVELAND DREON TERMINALS COMPART AND 24 MENOTOD	WAGE AND TAX STATEMENT \100
OFFICE OF DISTRICT AUDITOR OF DOTBORTURES ROOM 907 MICHIGAN CRITICAL TERMINAL BUILDING DETROIT, MICHIGAN 08716  Type of First EMPLOYER 5 reports represent and continuous auditors.	Copy C- for employees res.
TRANSPORTED TO THE CONTROL OF THE CO	ACA MANORE THAT ICA MANORE THA
391 10 5053	MANUS OF COTT CONTROL TO THE PARTY OF THE PA
C TONCZAK 2419 STANFIELD DR 24 PARMA JA DUJO	College (DC par. Section 1)

OFFICE OF REGIONAL COMPTROLLER ROOM 907 MICHIGAN CENTRAL TURNING BU	DC	WAGE	AND T	AX STA	TEME	NT 10	020	
DETROIT, MICHGAN 48216	DG				, 4,,,,,,	H	<b>JUO</b>	
34-4000-723			_	د ئے ،		Service .	٠.	
Type or print EMPLOYER'S identification number, name o	and address above			opy C-		loyee's r	ecords	
PEDERAL INCOME YAX INFORMATION			UNITY INTORM		HANK	GROSS WAC	65 FOR STATE	
MUDATO MITHHOLDING IN 1948.	PAID IN 1968	N FJ.C.A. EMPLOYEE TAX WITHHEEDS		I.C.A. WAGES D IN 1968	1. SINGLE 2 MARRIED	IP DAMENI	FROM FEDERAL	WW.
11,57 86,94	rajanaja Latija v	A NON	F	NONE	Ž		į	# H
Type or print EMPLOYEE'S	177	HAME OF HATE		STATE FORM NO		STATE TAX W	THHIBD .	7
subsol security number 391	10 5053						1	7
		NAME OF CITY		CITY HORM NOT		GIX IN MIL	никр	
C C TENCZON							i	_ in in in
2419 STANFIELD OR		• EXCLUDABLE SICK P	t t	••				
PARMA 34 CHIC		TAX ON THS 'Includes sign reported by	ł	is below sound do	<u> </u>	and size	i	- дари - 
	•	The social security (F.F.C.	is figures the se	nount to be report	نت سیب ے ل	ا سدر حَوْ بعامطيم	lacene les retur	
Type or print EMPEOYEE'S name and address fincluding I	·	Successful to selected by	stipleyee 18 year			er and 3,8% kg as wors, but are not :	chann Mara was	
		the the tome as veget si	our print Tasses	l Imone las Men	olina hat ma ma			_ ,-
The state of the s	and the same of the same of	A Contract of the Contract of	1		والمتأثر المواد		A CONTRACTOR	á vida.
						•		
		_						
			·	•				يدا: برخهب
			•			2	•:	•
			<i>i</i>				:	
PENN CENTRAL COMPANY 23-6000 765 OFFICE OF REGIONAL COMPTROLLER ROOM 707 MICHIGAN CENTRAL TERMINAL BLDG.		WAGE ANI	1.		,	196	0	·
DETROIT, MICHIGAN 48216	•		Сору	C-For e	mploye	's record	ds.	-
ype of print EMPLOYER'S identification number, name and ad	dress above.	j.	2.U-5-W M40	Treasury Depar				
HITHERAT INCOME TAX	ER COMPENSATION PARD IN 1948:	FICA EMPLOYEE TAX WITHHELDS	TOTAL FACA	WACES I SIN	CAL IN DAY	SS WAGES FUR FERENT FROM F		
146.16 1003.92	,	NONE	PADIN IN	1" .	ı	٠.		-
ype or prim EMPLOYEE'S	, —————	NAME OF STATE		OH MEO		TAX WITHING D	ми	M. 2
social security number 391 10		-		<b>J</b> .	],,,,,,	······································		1 =
	ħ	NAME OF CITY	CITY FO	£14 HO	CRYT	AL WITHHELD	i	
	1						•	
C C TCPCZAK 2419 STANFIELD DR		EXCIUDABLE SACK PAY	1		1.39		<u> </u>	н
PARPA 34 CHIC	-	TAN ON THE	1	1		. 🏂 :	4.5	••
	1:	Industry has reported by amployment the first income to magazine in figure	. Amount is below	be reported as we	- 125 pay enduri		<u> </u>	• ;:
	i	Pho social security (I SE & I cate in	1 1.0% indices 1%	le Hospid Inwise	o Bonolits and 3	N to old aga, sur	mora and	ŀ
		Auchalta annu ann				-		
ripe or print EMPLOYEE'S name and address finctuding ZIP cod		Clobility was area. *Prefactor that reported by employee are the same or was a shown and		es subject to social.	seiners; lases, but	t ann	and motion	
pe or print EMPLOYEE'S name and address (including ZIP cod		elasticus car account pa emblores		re subject to social Ten Information   bu	(Pipril) (Ques, but I ago cross Reps.)	P. <b>100</b> .		
ripe or print EMPLOYEE'S name and address (including ZIP cod		elasticus car account pa emblores		To internation be	identy tous, but I not more from I	P. 800.		<del>نصدی</del> ن
ripe or print EMPLOYEE'S name and address (including ZIP cod		elasticus car account pa emblores		era subject ne pouet Ten Internation, " bu	leinrif toon, but I net mone floor I	P. 800.	40-4-4-4	
ybe or print EMPLOYEE'S name and address (including ZIP cod		elasticus car account pa emblores		era subject to pound Ten tribernation " bu	leinny toon, but I no more han ! Sidesificio estic	P 800	41.	
ype or print EMPLOYEE'S name and address (including ZIP cod		contains amounted by employee market reported by employee market some on employ shows and and bother shirt time and	H post witges us or "Federal Insome	Tes Industrian by	And rose Rep. )	7 800.	A 1	
		contains amounted by employee market reported by employee market some on employ shows and and bother shirt time and	H post witges us or "Federal Insome	Tes Industrian by	And rose Rep. )	7 800.		
INN CENTRAL FRANSPORTATION COMPANY	Jej obove	elasticus car account pa emblores	H post witges us or "Federal Insome	Tes Industrian by	And rose Rep. )	7 800.	9	
NN CENTRAL FRANSPORTATION COMPANY 23-60 OM 815-15 NORTH 32nd STREET, PHILADELPHIA, PA. 191	D00765	WAGE A	ND TA	X STAT	EMENT	1969	9	
ENN CENTRAL FRANSPORTATION COMPANY 23-60 DOM 815, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 191 pe of print EMELOYER'S identification number, name, and a	D00765	WAGE A	ND TA	Tes Industrian by	EMENT	1969	9	-
ENN CENTRAL FRANSPORTATION COMPANY 23-60 DOM 815, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 191 pe of print EMPLOYER'S Identification number, name, and a 3 FEDERAL INCOME, TAX INFORMATION	D00765	WAGE A	ND TA	X STAT	EMENT	1969		
ENN CENTRAL FRANSPORTATION COMPANY 23-60 DOM 815, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 191 pe of print EMPLOYER'S ideaths orion number, name, and a  PEDERAL INCOME, TAX INFORMATION redeered, income tax. Wages poid subject to with	D00765	WAGE A	ND TA	X STAT	EMENT	1969		
ENN CENTRAL FRANSPORTATION COMPANY 23-60 DOM 815, 15 NORTH 32nd STREET PHILADELPHIA, PA. 191 pe of primi EMPLOYER'S ideath Existion number, name, and a  PEDERAL INCOME TAX INFORMATION rederral income tax: "Wages poid subject to with	DOO765	WAGE A	ND TA	X STAT	EMENT	1969		
ENN CENTRAL FRANSPORTATION COMPANY 23-60 DOM 815, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 191 pe or print EMPLOYER'S identification number, name, and a PEDERAL INCOME TAX INFORMATION rederal income tax withhold withhold holding in 19691 tit	DOO765	WAGE A	ND TA	X STAT	EMENT	1969		
ENN CENTRAL FRANSPORTATION COMPANY 23-60 DOM 815, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 191 pe of print EMPLOYER'S identification number, name, and a  FEDERAL INCOME TAX INFORMATION Federal income tax: Wages point subject to with withhold holding in 19691 tit	DOO765	WAGE A  SOCIAL SECUR  (Not subject	ND TA  OPY C-F	X STATI	EMENT	1969		
pe of print EMPLOYEE'S identification number, name, and a  FEDERAL INCOME TAX INFORMATION Federal income tax:  Wages paid subject to with holding in 19691  114  1256  1256  1256  1256  1256  1256  1256  1256  1256  1256  1257  1258  1	000765 104 didress above.	WAGE A  SOCIAL SECUR  (Not subject  Includes his	ND TA  opy C-fe  It in F. L.C.  reported  sick project	X STATI	EMENT	1969	000	
ENN CENTRAL ERANSPORTATION COMPANY 23-60 DOM BIS, 15 NORTH 32nd STREET, PHILADELPHIA, PA. 191 pe et primt EMPLOYER'S identification number, name, and a FEDERAL INCOME TAX INFORMATION  address income tax Wages poid subject to with bolding in 1969  119-56 6 or prim EMPLOYEE'S social security number	DOO765	WAGE A  SOCIAL SECUR  (Not subject  Includes in	ND TA  opy C-Fe  Ito F. L.C.  reported  reported  reported  reported  reported  reported  reported  reported  reported  reported  reported  reported  reported	X STAT	EMENT	1969	000	
ENN CENTRAL FRANSPORTATION COMPANY 23-60 DOM 815, 75 NORTH 32nd STREET, PHILADELPHIA, PA. 191 pe of print EMPLOYER'S identification number, name, and o  FEDERAL INCOME TAX INFORMATION  Wages poid subject to with withfield bolding in 19691  119-56 pe surprist EMPLOYER'S socied security, number  111-1	000765 104 didress above.	WAGE A  SOCIAL SECUR  (Not subject  Includes his	ND TA  opy C-Fe  Ito F. L.C.  reported  reported  reported  reported  reported  reported  reported  reported  reported  reported  reported  reported  reported	X STAT	EMENT	1969	000	

Type or pringEMPLOYEP'S name and oddress (including ZIP code) above.

ROOM 815, 15 NORTI	ANSPORTATION COMPANY 1 32nd STREET, PHILADELPHIA, PA	23-6000765	WAGE AND TAX STAT	
FEC	ERAL INCOME TAX INFORMATI		Copy C-For employ	ree's records.
TOUR BILLIAND IN	Wages poid subject to with-		SOCIAL SECURITY INFORMATION	STATE & LOCAL
withheld	holding in 1969:	Other compenso- tion poid in 19699		STATE & LOCAL TAXES WITHHELD
	Į.	1 1,0,0	·	
\$19,55	\$153.70	j .	(N=4 - 1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	
TYPE OF PRINT EMPLOYE	'S social socurity number	L	(Not subject to F. J. G. A.)	
			' Includes tips reported by employer	C. Amount is bules a
		<b>i-1</b> 0-5053	I STATE OF THE POST CALLESTON	
- C C TONG	249		Add this item to wages in finisher	the amount to be remuted
2419 614		646073	en wogen and saloties on your income tex	ratura.
2419 514	nad t fil	620 862		<del></del>
PANNA 30	0140		1	
L.		•		<u> </u>
Typo or print EMPLOYE	PS 0000	••		
FORM W. 2	('S name and address (including 2)	P code) above.	Uncollected Employee Tax on Tips	<del></del>
. 04111 14-2 - 0. 5	Troosury Department, Internal Revol	nua Servica	The state of the s	\$
	in the same of the	:	•	
ب حسب			and the same of th	:
PENN CENTON TO				
ROOM 215, 15 NORTH	1 32nd STREET, PHILADELPHIA, 1	5000765 PA. 19104	WAGE AND TAX STATEN	IENT 1971
Federal income tax	RAL INCOME TAX INFORMATIO	IN	SOCIAL SECURITY INFORMATION	
withheld	Wages poid subject to with holding in 1971 t	Office compensa-	MOINMANION	CIBRITION STATE
1	•	tion poid in 1971 >	}	•.
21464*85	\$9863,39			
lynn na a da Europa			INat subject to F. I. C. A.;	\$78,55
Type or print EMPLOYEE	S social security number			
1.1	391.	-10-5953	Includes tips reported by employee. At	mas is before pay
C L TOMO	. A.V.		by exclusion	
26.0 07	LOK	546073	2 Add this item to wages in figuring the	amount to be reported
2449 STA	iratt	320 047.	as wages and solaties an your income for retu	tn
PARMA 34		1.74		
1 .		.		• • • • • • • • • • • • • • • • • • • •
Type or print EMPLOYEE'S	name and address fincluding ZIP			
	The construction of the	code) obove	Uncollected Employee Tax on Tips	

e Estados de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Comp				
EXPENDITURES TO AUDI	6001599 TOB OF DISSUES	WASE AND J		IOAR
DF IRO LT. WICH CAN 48216	objection above	A Lancon Con A	Y C for and age	Carr Max
Octob Becautify market and College Col	79 W51	WHE THE N		
I THE MAINTOUL IN PLA GRUNSWICK OHLO	(E	Burning Tel Street and IV		
Power by July 2 now and oddress shows				
34 6000725 THE CLEVELAND UNION TER OFFICE OF BISI, AUDITOR EXPENDITURES ROOM 937	MINALS OF CO	WASE AND T	gsidines.	) 1985 -
WICHIGAN CENTRAL TERMIN DETROIT, MICHIGAN 48216 Type or professional terminal AL BLDG				
802 41 7 7768 31	63   1051	HOWE M	NOTE NOTE NOTE NOTE NOTE NOTE NOTE NOTE	
EC UMER 1146 MANITOULIN PI BRUNSWICK OHIO	net Add Inse	DATE House, ARTHROSE, SICK PAR. ARTHROSE, SICK PAR. Arthrose popular behaviora, b. sky pre- men sales market. Care pre- men sales as installed, and other this house to magnet in figuring. Non- this house to magnet in figuring. Non- this house, house, market.  2 year always mark behavior to be lead		
Type or print EMPLOYER'S name, and address obove FORE W. 3—10.5 Pressure Department, Married Kinstons Services				
34 6000723 THE CLEVELAND UNION TENES	ijki s	ACL AND TAY CT		
OFFICE OF DIST. AUDITOR O EXPENDITURES ROOM 907 WICHIGAN CENTRAL TERMINAL DETROIT MICHICAN 48216 TO DETROITE AUDITOR OF THE PROPERTY OF THE PR	BL DG	Resp Pro-	Hi	
With stood to write the mark t	NO 1			
F C UNEA FE48 MANITOULIN PIKE BRUNSWICK OHTO	Primary of the Control of the Contro			
Job of pint UNIONE'S come and address choice				

THE OPENING THE PROPERTY OF TH	WASE AND TAX SPATEMENT 1967
White the second	TA MACHE TO THE PROPERTY OF TH
1966 PARTORIES PERS	
THE CLINES OF MICH DESCRIPT CONTRACT OF DEPOSITURES	WAGE AND TEX STATEMENT, 1967.
The or print MEDITE I supply the receiver of the angle patterns where the control of the control	MUNE WORK & COMMISSION OF THE PROPERTY OF THE
F. C. LIVER 1 FAST MANITTON TO LIKE BRUNSWICK CONID  1/foc or print IMPROVIET, name, and address finducing ZIP code) above.	
THE CEVELAND CORON, TERMINALS COMPANY	
OFFICE OF DETROY ALDITOR OF EXPENSIONS  DON'S WINDOWS (MITTAL TERMINAL BURDING  DETROY WORKER SHOPE TO THE WIND SHOPE OF THE PROPERTY OF THE P	WAGE AND TAX STATEMENT 1967
033 13   13   1991	HOME BOME
11-40 PARISTOULIN PIKE BRUNSWICK OHIO  Troo or print EMPLOTE'S home and address (settling 2P grows print)	

## Pennicentral Company

Collinwood, Ohio May 2, 1969

REGISTERED MAIL -RETURN RECEIPT

J. F. Acron

37096 Sugar Ridgo Rd.

N. Pidgerillo, Ohio

Dear Sir:

Article 6 of the Agreement effective February 16, 1965 which provides for the "top and bottom seniority roster consolidation of NYC Cleveland Terminal District (Freight Yard) yard service employees and C.U.T. yard service employees" reads as follows:

"All furloughed employees on the present separate seniority rosters will be recalled to service before new men are employed. Cleveland Union Terminals Co. yardmen recalled from furlough for assignments, including the extra list, in NYC Cleveland Freight Yard territory must report for service within fifteen days of the date notified by U. S. Mail at their last known address or forfeit all seniority in both territories."

Your seniority in the former NYC Cleveland Terminal District (Freight Yard) is such that you now stand for work in that territory. You are hereby recalled to active service in said freight yard territory and you have fifteen (15) days or until May 20, 1969, to report for service. Failing to do so you will forfeit all seniority on the Cleveland Union Terminals Company as well as on the Penn Central unless, of course, you are unable to pass the required return to service physical examination at this time.

Yours truly,

D. J. Weisbarth General Yardmaster

CC: O. A. Williams

H. A. Anderson

S. J. Cala

J. Rose, Jr.

M: J. A. Lyons,

D. J. Weisbarth

G. Stalder

J. M. Taylor

Exhibit

Cut. 10- 39736 Rosfer 1965 Seniority #45 April-30-1446

Jack F. Acree 55-293-07.7305

Furfoughed 2.25.68

Accepted recoll- June-1969

Worked 2 or 3 days

Marked off work 
Never returned to Work after

again being recalled. Dec. 13.1969

to his original prior right

C.U.T. Ipcation 
Died -July 6.1982

Guarantee 717.50

.

Cut. 1D . 39788
Roster 1965
Seniorit, # 46
MAY-1-1946

Edward Benko 55-713-14.4349

Accepted recall - and on other Returned to work wine. 13. 1969

Retired 
5 758.56

**APPENDIX-0318** 

CUT-10-39513

Ruster-1965 Kenneth B. DAY

Smunty & 55-400-10-6263

# 32

July-30-19-44 Furloughed 2.25.68

Coccepted recall of June - 8 68
on CUT YARD BOARD.

Worked until redired
at Age 65 12-28-76

Guarantee 1788.95

CUIT 1D 39859

Roster 1965

Schlority #51

Nov. 1. 1946

Roster 1965 Harvey E. Doran Schority #51 SS. 280-12 9565

Furloughed 2.25.68

Accepted recall- ATT 15 1969

On Clit. extra board.

Also worked NYC. froingh YNS.

Worked until Aug. 28 1972

When he died.

Guarantee - 381.89

Cut. 1D 39801 Roster 1915 Senority 50 July 10 1946

Joseph. D. GAStony 55- 272-03-5768

Furloughed 2.25.68

Accepted recall-And

Feturned to work - Vune 30.68

Retired Age-62- OCT. 18.73.

Whiled- NYC. FREIGHT VOS
Guarantee \$ 604,10

.

CIST - 1D - 39762 Roster - 1968 Seniority # 43 March 15 1946

George A. Gentile 55-713-14-2366

Furloughed 2.25-68

Accepted recall After Sept-15-1969

Worked NYC Freight Yds.

Relined - Age 65- Nov. 7. 1978

Died Sept-18. 1982

Guarantes 377.17

Cut 10-9483

Rester 1965 - George R. NORRIS

Summy SS-713-18-5105

April 27-1945 Furloughed 2.25-68

Recalled to Worke on

Nume-8-1968 - and acepted recall.

Pale of Sinth April-29-1910

Retired - April-29-1910

Retired - April-29-1975 (5-1-75)

Age 65

Guarantee 742-70

.

CUT. 1D 9589 Roster. 1965 Seniority \$58 Aug. 2-1951

Christ Steimle dr. 55-288-22-4006

Firloughed 2.25-68

Eid Not Accept previous recolls

Disabled at time of palune.13-69

recall-" broken tag-" tome to later, accepted second!

Returned to work before

Dec. 12.1969 
Retired-1880-

GRESENTLY LIVING GREATER + 280.22

Colit 10 39730

Roster 1965 Clarence C. Tomczak

Semority # 41 - 55 391-10-5053

Jan-6-1946

Tuiloughed 2 15-1968

dad Not becept recall until

Dec-15, 1969 
Worked NYC Freight yds

Retired from Service by excepting

Seperation Allowance.

Subsequently Clied. Sept-18-1982.

Guarantee 835.74

Cut. 10-39678

Rostur-1965 FRANCK C. ZIHER

Simonity # 38 - 55. 286-03. 1051

Aug-20-1945

Furloughed 7.25.68-25 mainman

F. Wher worked as station master

CU.T. MAR. 31-61-To April 30.1971.

Accound station masters Job abolished

April 30

April 30

A trainman MAY-1-71.

LAST worked as a trainmen

Dec 26-71. Markon off Sich

Dec. 26-71 Marked of sick then on leave of absence"

Collected - 1971 - 4 week Vocation pay 1972.

Paid to descendants wife.

Guarantee 703.03

.

Jan 28,1976

30.0278

W. BILINSKY

626718

Presently working at Rockport as a Carman.

Bilineky was furloughed from the CVT prior to 1966. On April 6, 1966, he established seniority at Rockport and is currently working there as a Carman.

No further action.

Not granted a dismissal or displacement allowance.

Date Hired 6/26/55 date furloughed 11/7/65 date transferred 4/6/66 died 7/24/77

Last day worked: October 31, 1973 Collinwood Car Department Marked off account of sickness Disability Pension: February 12, 1974. BIRTH 1-24-19

Crtalic was furloughed from the CUT on August 12, 1969 and was assigned a position of Carman at Collinwood on August 13, 1969.

No Aurther action.

Not granted dismissal or displacement allowance.

ficelout

Lungled 8/12/69 Kransfer 8/13/69

DISABILITY PENSON 2/12/74

Presently working at Rockport as a Carman.

Foecking was furloughed from the CUT prior to 1966. On March 4, 1966, he established seniority at Rockport and is currently working there.

No further action.

Not granted a dismissal or displacement allowance.

date herel 6/25/46
date transferred 3/4/66
working Rockport

Jan 28,197.

320064

Last day worked: September 1, 1972 Hail Hall Date of birth: May 17, 1909 65 ii 1974 -DP- 9-2-72

Janke's position at the CUT was abolished on April 30, 1971.

Effective May 1, 1971 Janke was awarded a position at the Mail Hall and was immediately paid a displacement allowance from May 1, 1971 until September 1, 1972.

With the close of business on September 1, 1972 Janke's position at the Mail Hall was abolished.

On August 28, 1972 Janke was offered a permanent position at Rockport but he refused on August 29, 1972.

Janke was denied a displacement allowance because of his refusal to accept comparable employment.

Janke was again offered employment on November 16, 1972 and was willing to accept, however he failed to pass a return to work physical examination and was physically disqualified on December 7, 1972.

hiredout 12/6/29 faadoughed 4/30/71 transferred 8/28/172 ceticed 7/9/174

Last day worked: October 29, 1971 Mail Hall Retired: November 2, 1971

Jarabeck's position at the CUT was abolished on April 30, 1971 and he was assigned a position at the Mail Hall on May 1, 1971.

Jarabeck was allowed a displacement allowance from May 1, 1971 to hundowt 4/5/26 "1=0100 furloughed 4/30/71 transferred no retried 1/1/71 October 29, 1971. Total amount \$201.75.

Jan 28, 19 76

320075 660659

> Last day worked: July 8, 1974 Rockport Car Department Retired: July 9, 1974

Kochenderfer's position at the CUT was abolished at the close of business on April 30, 1971 and max he was offered comparable employment at Rockport.

On May 6, 1971 Kochenderfer refused employment at Rockport on the basis he could not carry his CUT seniority date to Mockport.

Kochenderfer succeeded in obtaining a position at the Mail Hall on July 5, 19 and worked there until September 1, 1972 when his position was abolished at the close of business. On August 28, 1972, Nochenderfer was offered a Carman position at Rockport, but he refused to accept on the same basis as before.

Kochenderier was again offered employment at Rockport and he accepted a Carman position on October 9, 1972 and worked there until he retired.

Kochenderfer was not allowed a displacement or dismissal allowanco.

hiredout 16/29/36 furloughed 4/30/71 transfer 10/9/72 utiled 7/9/74

•

Presently working at Rockport as a Marman

McLaughlin was furloughed from the CUT prior to 1966. On November 19, 1969, he established seniority at Rockport and is currently working there as a Carman.

No further action.

Not granted a dismissal or displacement allowance.

heredout 6/28/44

furlougheef 2/18/67 transferred 11/19/69

working Rockport

Presently working at Rockport as a Carman.

McNeely was furshoughed from the CUT in 1967 and applied for a position McNeely was luraougned from the tur in Lyo, and applied for a position of Carman at Rockport and established seniority there on December 2, 1967.

Not granted a dismissal or displacement allowance.

hirebout 6/10/43 Justoughed 1/18/66 transfer 12/2/67 Working

16 84 94

A. C. NOVOTNY

627260

Presently working at Rockport as a Carman.

Novotny was furloughed from the CUT prior to 1967. On November 20, 1967 he established seniority as a Carman at Rockport and is currently working there

No further action.

Not granted a dismissal or displacement allowance.

hiredout 11/11/39 Hurloughed 6/18/66 Franspierred 11/20/67 Stell Working 11/11

M. OPAIX

629314 320030

Presently working at Macedonia Car Shop as a Carman.

Refined . 6-16-16

Opalk worked as a Coach Cleaner at the CUT until his position was abolished on August 27, 1969.

On January 31, 1970 Opalk was employed as a Carman at the Collinwood Diesel Terminal and was furloughed on September 30, 1971.

On May 20, 1972 Opalk applied for a Carman position at Holton Street and established seniority on that date. He was furloughed for an unknown period sometime between May 20, 1972 and October 24, 1972 and submitted a claim for a dismissal allowance. He was paid \$345.86 which represented a total due as a dismissal allowance.

Opalk did not submit a claim for a dismissal or displacement allowance other then mentioned above.

He is currently working as a Carman on the Cleveland Division.

entered service 1/8/42 Retired 6/16/16

dute ferloughed 8/27/69

dute transferred 1/31/70

dute retired 6/26/76

Last day worked: July 25, 1975 Collinwood Car Department Deceased: July 27, 1975

Pentz was furloughed from the CUT in 1967 and established seniority at Collinwood on November 17, 1967 when he applied for employment and was assigned

No further action.

Not granted dismissal or displacement allowance.

firedout 1941
ferdoughet 1/20/67
transferred 12/17/67
duid 7/27/75

Jan 28, 1976

9~18HH

R. N. SCHREINER

320042 631426

Presently working at Meter Yard as a Carman.

Schreiner was furloughed from the CUT on August 27, 1969 while employed

On August 29, 1969 Schreiner was assigned as a Sheetmetal Worker at the Collinwood Back Shop and was furloughed on September 17, 1971.

On May 20, 1972 Schreiner applied for a Carman position at Holton Street and established seniority on that date. He was furloughed for an unknown period sometime between May 20, 1972 and October 24, 1972 and her submitted a claim for a dismissal allownce for the same period. Schreiner was paid \$144.66 which represented the total amount due him while being furloughed.

Schreiner did not submit a claim for a dismissal or displacement allowance other than mentioned above.

He is currently working as a Carmon at Motor Yard.

firedont 3/14/42

firedont 3/14/42

firedont 8/27/69

firedont 8/27/69

transfidate 8/29/69 Sheet metal Worker

5/20/72 CARMAN—

5/20/72 CARMAN—

still working

Jan 28,1976

717-10-9420

P. SCUBA

665233 320098

Last day worked: November 30, 1975 as a Carman at Rockport Retired: December 1, 1975 /

Scuba was furloughed from the CUT in 1968 and established seniority at Rockport on August 13, 1969. He worked at Rockport until the date he retired.

No further action.

Not granted a dismissal or displacement allowance.

Date Heied 5/20/46

date furloughed

No date transfered 8/13/69

date retired 11/30/75

BIRTHOAY 1-29-15\_

G. U. SOHINER 320060 650113

Last day worked: October 3, 1971 (This day was worked at the Mail Hall when he was called to cover a vacancy of G. Janke.)

Sophner was on a furloughed status prior to Hay 1, 1971 but was used to cover vacation vacancies, day to day vacancies and extra work, at the Mail Hall.

On June 7, 1971, Sophmer was offered comparable employment at Rockport but refused to accept. Sophner was again offered employment at Rockport by letter dated August 29, 1972 and refused.

Sophner was not granted a "Dismissal or Displacement allowance.

presently not working for PC.

Aviel out 12/5/4/

furingful 11/6

transfund diament

bust day worked 10/3/7/

closed out 7/1/75

Jan 28, 191.

P. P. SOWINSKI

3200j**25** 628992

Last day worked: June 30, 1975 Macedonia Car Department Retired: July 1, 1975

Sowinski's position at the CuT was abolished at the close of business on April 30, 1971 and he was offered comparable employment at Rockport.

On May 6, 1971 Sowinski refused the offer of employment at Rockport on the basis he could not carry his CUT seniority date to Rockport.

Sowinski was offered employment at Motor Yard and accepted and worked there from April 18, 1972 to April 28, 1972.

Due to subsequent retirements of Carmen working at the Mail Hall in the CUT seniority district, Sowinski was assigned a position at the Mail Hall on April 29, 1972 and worked there until his position was abolished with the close of business on September 1, 1972. Last day worked at Mail Hall: Sept. 1, 1972.

On August 28, 1972 Sowinski was offered a Carman position at Rockport, but he refused on the same basis as on May 6, 1971.

Sowinski finally accepted employment at Rockport and established seniority there on December 2, 1972. He continued to work until he retired on July 1, 1975.

Sowinski was not granted a dismissal or displacement allowance.

hiredout 8/4/36 fuloughed 4/30/7/1 transferred 12/2/1/2 retired 7/1/75 1 13 28 Park

Philadelphia, Penna.

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

Employe	Name W. Bilinsk	<u> </u>
Ident.	Number 626715	
s.s.n.	Number 375-20-0	0572
	Group: 3100	
1968 \$10,277.51	19 73	18,613.44
1969 \$ 13 059.07	1974	11,529.84
1970 # 10,302.57	1975	\$1 —— 20,564.43
1971 9659.34	19 76.	21,726.61
1972 14,396.37	19 77	13,162.57
	Died-7.29	<i>i-77</i>

Assistant Controller - Payrolls & Employee Benefits

## Philadelphia, Penna.

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

		Employe Name Ident. Number_	J. CRTALIC CUT 320097 PC 665361	
		S.S.N. Number_	720-c1-1754	
		Payroll Group	J160	
CUT	1968	NONE	1972	<sup>\$</sup> 13,231.26
<del>-</del>	(JAN 76 46 6 12)	N. V	1973	
	(AUC TO DEC.)		2974 Disability	- 4 1,132.00 2/14/14
	19 70	15,502.09	19	· .
	19 <i>7</i> /	# 11 11655	19	

Assistant Controller - Payrolls & Employee Benefits

## Philadelphia; Penna.

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

Employe Name	P.D. FOECKING	
Ident. Number_	675619	
S.S.N. Number_	270-26-1863	
Payroll Group	3100	
1968 7236.72	19 73	- 11,802.46
1969 \$ 7124.32	1974	12,970.68
1970 F303.74	1975	\$ 13,764.23
1971 4760-22	1976	15,020.85
1972 10820 33	19 77	13,498.58
,	1978	16,782.04

Assistant Controller - Payrolls & Employee Benefits

## Philadelphia, Penna.

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

Employe Name	G . JANKE	
Ident . Number	CVT	32 co c 4
1588	35	
S.S.N. Number	713 - 12 - 085	
Payroll Group		
1968	NoNE	19
1970	NONE	19
1971	NONE	19
1972	19	

Assistant Controller -Payrolls & Employee Benefits

CEPT 100

.

.

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

		Employe Name	J.M. JARABECK
			CUT 320072 PC 660393
		S.S.N. Number	0.00
		Payroll Group	
cut	1968	_NONIE	19
	19 49	#476.45	19
i è	19 70	- NONÉ .	19
	1971 Katuer	NENE MINTI.	19
	19		19

Assistant Controller -Payrolls & Employee Benefits

.

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

Employe Name <u>F.W. Kochen Derfer</u>

Cut 320075

Ident. Number <u>Pc 640659</u>

S.S.N. Number <u>713-14-4353</u>

Payroll Group <u>3100</u>

Cut <u>1968</u> None <u>Pc 1972</u> 187424

Cut <u>1969</u> # 407.49 Pc <u>1973</u> 812,513.60

Cut <u>1970</u> None <u>1974</u> 11,009.86

Cut <u>1971</u> None <u>19</u>

(Jan To Jef)

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

	Employe Name <u>£</u>	E. McLAUGHLIA	<u>/</u>
	Ident. Number	628365	
	S.S.N. Number	282-24-1502	· 
	Payroll Group	3100	<u>.</u>
1968	NONE	1973	_ 10,671.00
19 64	670.49	19 74	#19,421.95
<u>19 70</u>	10,698-42	1975	_416,334.20
19 7/	# 4916.70	1976	_ 20,333.68
19 7	845136	1978	_22,648.87 14,190.08

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

	Employe Name _	R. Mc NEELEY	<del>.</del>
	Ident. Number_ S.S.N. Number_	432197 247-16-2283	
	Payroll Group_		
1918		<b>19</b> 73	16,361.19
19 69		19 74	13,74058
19 70		1975	_ 14,148.97
19 7/	# 9858.70	1976	19,650.67
19 74	12,144.03	1977	18,151.36
		1978	22.084.94

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

•	Employe Name	. C. NOVOTNY	<del></del> .
	Ident. Number	627260	
	S.S.N. Number	277 168496	·
	Payroll Group	3100	
19 68	1174.40	19 73	13,206.81
19 64	<u>+ 961309</u>	19 74	13,614.48
19 70	# 9003.16	1975	14,044.70
19 71	#10,124.60	<b>19</b> 76	15,368.39
1972	11,145.20	1977 1978	_16,271.20 17,189.72

Assistant Controller -Payrolls & Employee Benefits

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

Employe Name M. O.PALK

CUT 320030

Ident. Number Pc 629314

S.S.N. Number 286-63-5496

Payroll Group 3100

(JAN 50 A06.)

R 1973 11,250,88

PC 1969 2175.83 1974 11,503.88

PC 1970 8430.94 1975 13,05695

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

Employe Name	L.S. PENIZ
Ident. Number	629247
S.S.N. Number	286 63-1368
Payroll Group	
1968 7257.43	1973 #12,273.41
19 69 \$ 7217, 43	1974 12,407.19
1970 9219.35	1975 \$ 6577.57 Quel 1/1/175
19.71 10,622.88	19
1972 10,764.55	19

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

	= = = = = = = = = = = = = = = = = = = =	R. N. Schreinen U.T. 320042. C. £31416	
	S.S.N. Number_	294-09-1844	
	Payroll Group_	3100	· · · ·
C.U.T 1968 -	32814	1972	6125.2C
(Jan To 106)	NONÉ	<b>197</b> 3	11 10,489.83
(ADG, TO DEC.) PC 1964	214832	19 <i>7+</i>	13,316.5°
Pc. 1970	_ #8930.56	1975	#13,648.5
1971	_#6848.00	1976	14,791.87
		•	15,791.46 6,107.87

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

		G.U. SOPHNER
		CUT 330060 PC 650413
	S.S.N. Number	710 - 18 - 280
	Payroll Group	
1968	Neni	19
1969	48890	19
19 70	D NONE	19
19 7/	NONE	19
19		19

Assistant Controller -Payrolls & Employee Benefits

District Claim Agent

Dear Sir:

This will acknowledge your request for statement of earnings for the following:

•

Englises Exhibit 48

# THE PENN CENTRAL TRANSPORTATION COMPANY

Collinwood, Ohio June 23rd, 1969

File: 3600

MESSRS:

G. Steimle, Jr.

W. J. Potosky

Wm. Prochaska

M. J. McLaughlin

R. Beedlow

G. A. Gentile

A. Augustus

W. F. Grady

H. E. Doran

C. C. Tomezaki

S. Tannenbaum

Since you have not reported for service in Collinwood or Rockport Yards as directed by my letters of May 2nd and May 26th, 1969, you have forfeited all seriority persuant to Article 6 of the February 16th, 1965 agreement.

> D. J. Weisbarth General Yardmaster

DJW/kmk

CC: G. Ellert

Employeez Glat 49

Cleveland, Ohio July 2, 1969 m-1

#### Mr. R. V. Brinkworth:

Due to their failure to respond to recall notice dated May 16, 1969, as required by Article 6 of the Agreement effective February 16, 1965, the following named men have forfeited all seniority in the Cleveland Union Terminal as well as Penn Central Company and will not be considered employees of either Carrier. These men will not be called for any service whatsoever as their relationship with the Carriers has been severed:

- R. Beedlow
- A. Augustus
- H. E. Doran
- W. J. Potosky
  - G. A. Gentile-
- W. F. Grady
- C. C. Tomczak
- S. Tannenbaum

C. L. Stalder

cc.. Messrs. J. 4. Taylor

D. J. Weisbarth

S. J. Cala

S. Cordiano

J. Rose, Jr.

F. J. Villa



# PENN CENTRAL COMPANY

Cleveland, Ohio

m-- †

Mr. J. A. Lyons Gen. Chm., U.T.U.(T) 2063 Fast Fourth Street Cleveland, Ohio 44115



RECEIVER

Dear Sir:

Union Terminals Company yardmen as referred to in letter addressed to Superintendent /Brinisworth by Local Chairman Anderson under date of July 1, 1969.

It is a fact that Messrs. C. Steimle, Wm. Prochaska and M.J.McLaughlin have been found to be physically incapacitated for return to service at this time. That being the case their names have not been removed from the seniority roster.

It is also true that Messrs. G. Contile, C.C. Tomezak and W.J. Potosky did take a return to work physical examination and did report to the crew dispatcher at Collinwood but were erroncously advised that they would not be permitted to exercise their seniority in the freight yard. However, when this error was discovered a day or two later an attempt was made to reach each of three men by telephone and when they could not be contacted a message was left for them at their homes that they would stand for work in the freight yard and would be permitted to exercise their seniority. Despite such advice none of the three men made any further attempt to report in and exercise their meniority.

It is also a fact that Messrs. R. Beedlow and H. E. Doran did contact or. Mishler's office for an appointment for a return to service physical examination but when they were unable to get an appointment at that time, they have subsequently made no further effort to do so.

Because of these extenuating facts Carrier is willing, as you were advised during the August 21 conference, to restore the seniority of Messrs. Gentile, Tomczak, Potosky, Beedlow and Doran provided they return to active service on or before September 15, 1969. Since it is more than thirty days that the first three were examined, all five will be required to take the return to service physical examination prior to reporting for work on or before September 15. If they should have any difficulty obtaining an appointment for the return to service physical examination, they should contact General Yardmanter Weigharth or Analystant Superintendent-Labor Relations Taylor for assistance.

(continued)

Mr. J. A. Lyons

This leaves Messrs. S. Tannenbaum, W. F. Grady and A. Augustus who have not responded in any way to the May 16, 1969 recall notice and Carrier considers they have thereby forielted all seniority and employment rights. he are willing, however, if these men are desirous of returning to service to further discuss the matter of their reinstatement on the condition that they also will report for return to service examinations and make themselves available for active service not later than September 15, 1969.

Yours'truly,

Superintendent-Labor Relations and Personnel

Rockport, Ohio August 28, 1972 File: 10.4

Mr. Edwin Kochenderfer 10814 Glamer Drive Cleveland, Ohio

Dear Sir:

Due to the closing of the Mail Hall, and the elimination of the Carman positions, I, at this time, would like to advise you there are permanent vacancies in the Rockport Yard area.

If you desire, or would like to have one of these positions, please advise, no later than September 11, 1972, of your wishes.

Sincerely yours,

PENN CENTRAL TRANSPORTATION CO.

C. R. Harmon

General Car Foreman

CR. Hormon

cc: J. A. Basile
Iabor Relations
P. Scuba



Rockport, Chio August 28, 1972 File: 10.4

Mr. Peter P. Sowinski 9210 McCracken Elvd. Garfield Hts., Ohio

Dear Sir:

Due to the closing of the Mail Hall, and the elimination of the Carman positions, I, at this time, would like to advise you there are permanent vacancies in the Rockport Yard area.

If you desire, or would like to have one of these positions, please advise, no later than September 11, 1972, of your wishes.

Sincerely yours,

PEMN CENTRAL TRANSPORTATION CO.

C. R. Harmon

General Car Foreman

cc: J. A. Rasile
Labor Relations
P. Scuba

Rockport, Ohio August 28, 1972 File: 10.4

Mr. Gus Yanke 15 Lakeside Cleveland, Ohio 44110

Dear Sir:

Due to the closing of the Mail Hall, and the elimination of the Carman positions, I, at this time, would like to advise you there are permanent vacancies in the Rockport Yard area.

If you desire, or would like to have one of these positions, please advise, no later than September 11, 1972, of your wishes.

Sincerely yours,

PENN CENTRAL TRANSPORTATION CO.

C.R. Hormon

C. R. Harmon General Car Foreman

cc: J. A. Pasile
Inbor Relations
P. Scuba



JOINT PROTECTIVE BOARD
B. PICCIANO
453 - 9th ST.
FAIRVIEW, N. J., 07022
BROTHERHOOD RAILWAY CARMEN
OF THE UNITED STATES & CANADA

DIRECTOR

OCT 5 1972

LABOR RELATIONS

September 30th, 1972

Mr.N.Paterson, Director Labor Relations Cleveland Union Terminal 6 Penn Plaza Philadelphia, Pa.19104

RE:September 25,1964, Mediation Agreement, Abandonment C.U.T. Terminal.

Dear Sir:

On May 1,1971 all trains in and out of Cleveland Union Terminal were discontinued.

The undersigned makes claim for (4) Four Carmen adversely affected due to the discontinance of trains numbers 63,64,15,18,315,316,98,51 and 28.

On April 30,1971 the following Carmen were working J.Jarabeck, L.Smolik, G.Janke, S.Novotny, E.Kerchenderfer, Sowinski, J.Pentz and (G.Sophner)

Claims for J. Jarabeck, S. Novotny, L. Smolik and J. Pentz.

The undersigned will be in Philadelphia on Wednesday, Thursday and Friday October 11,12, and 13,1972, and would like with you on any one of the above listed days, as per the above subject matter.

very truly yours,

B.Picciano,General Chairman

cc: gl,bd,file



HIDIANA HARBOR BELT & ALLIED LINES
JOINT PROTECTIVE BOARD

B. PICCIANO 458 - 9th ST.

FAIRVIEW, N. J. 07022 BROTHERHOOD RAILWAY CARMEN OF THE UNITED STATES & CANADA DIRECTOR

OCT5 1972

LABOR RELA

October 1,1972

Mr.N.Paterson, Director Labor Relations Penn Central 6 Penn Plaza Philadelphia, Pa.19104

Re:Sept.25,1964, Mediation Agreement, Transfer and Abandonment Cleveland Mail Hall.

#### Dear Sir:

As per our oral conversation in Philadelphia on September 14,1972 with reference to the above subject matter, and you advised the undersigned to write your office for further discussion on the subject matter.

This is to advise that i will be in Philadelphia on October 11,12, and 13,1972 and, would appreciate meeting with you on the matter.

Claims for: G.Janke

E.Kerchenderfer

P.Sowinski

Due to closing of the Mail Hall CLeveland, Ohio September 1,1972.

Very truly yours,

B.Picciano, General Chairman

cc;Gl,bd,file ps

October 3, 1972

Mr. S. D. Dutrov Penn Central Transportation Co. c/o Room 114 - V. Goncourse Cleveland Union Terminal Cleveland, Ohio 44113

Dear Mr. Dutrows

with regard to our July 5, 1978 meeting and reference to Mr. P. Sowinski who was furloughed on March 12, 1972.

This was due to transfer of work when trains 55 and 56 were discontinued and the work transferred to freight. This jeb re-established on May 3, 1972.

I was told that his case was being processed, I've heard nothing since.

Paul Scuba

Local Chairman Lodge 1055

co: Mr. Benjamin Picciano

Mr. N. P. Patterson

PENN CENTRAL TRANSPORTATION COMPANY

Rockport, Ohio October 3, 1972

Mr. P. P. Sodnski 9210 McCracken Blvd. Garfield Heights, Ohio

Dear Sir:

Referring to my letter of August 28, 1972, notifying you of openings at Rockport Yard, and Mr. P. Scuba's letter of September 5, 1972, requesting full semiority or the terms of Article I, Sections 2 and 6 of the September 25, 1964 Agreement.

The request is without merit nor applicable in this instance. Unfortunately, we cannot arbitrarily allow employees from one semiority district to carry their semiority to an entirely different semiority district without being in violation of the applicable Agreements involved.

Furthermore, you were not deprived of employment as a result of a change in operations for any of the reasons set forth in Section 2. Therefore, Sections 2 and 6 of Article 1 are not applicable.

The registered letter sent to you, notifying you of permanent vacancies in the Carmen's Craft at Rockport Yard "carried no implication of a threat", nor was it harassment. This was strictly a letter of formally notifying you of employment if you so desired to work. The letter was registered to guarantee delivery and you were given the courtesy of 15 days from the date of the letter to express your desire to accept such employment.

Very truly yours,

cc:

S. D. Dutrow

J. A. Basile

C. R. Harmon

General Car ForRENNICENTRAL COMPANY OFFICE OF

OCT 5 1972

LABOR RELATIONS & PERSONNEL CLEVELAND, OHIO

#### PENN CENTRAL TRANSPORTATION COMPANY

Rockport, Ohio October 3, 1972

Mr. Edwin Kochenderfer 10814 Glamer Drive Cleveland, Ohio

Dear Sir:

Referring to my letter of August 28, 1972, notifying you of openings at Rockport Yard, and Mr. P. Scuba's letter of September 5, 1972, requesting full seniority or the terms of Article I, Sections 2 and 6 of the September 25, 1964 Agreement.

The request is without merit nor applicable in this instance. Unfortunately, we cannot arbitrarily allow employees from one seniority district to carry their seniority to an entirely different seniority district without being in violation of the applicable Agreements involved.

Furthermore, you were not deprived of employment as a result of a change in operations for any of the reasons set forth in Section 2. 'Therefore, Sections 2 and 6 of Article 1 are not applicable.

The registered letter sent to you, notifying you of permanent vacancies in the Carmen's Craft at Rockport Yard "carried no implication of a threat", nor was it harassment. This was strictly a letter of formally notifying you of employment if you so desired to work. The letter was registered to guarantee delivery and you were given the courtesy of 15 days from the date of the letter to express your desire to accept such employment.

Very truly yours,

C. R. Harmogenn Central Company
General Car Fore of Car Fore Office of

OCT 5 1972

CC: S. D. Didrow
J. A. Basile

CLEVELAND, OHIO

#### PENN CENTRAL TRANSPORTATION COMPANY

Rockport, Ohio October 3, 1972

Mr. Gus Janke 15 Lakestde Cleveland, Ohio 44110

Dear Sir:

Referring to my letter of August 28, 1972, notifying you of openings at Rockport Yard, and Mr. P. Scuba's letter of September 5, 1972, requesting full semiority or the terms of Article I, Sections 2 and 6 of the September 25, 1964 Agreement.

The request is without merit nor applicable in this instance. Unfortunately, we cannot arbitrarily allow employees from one seniority district to carry their seniority to an entirely different seniority district without being in violation of the applicable Agreements involved.

Furthermore, you sere not deprived of employment as a result of a change in operations for any of the reasons set forth in Section 2. Therefore, Sections 2 and 6 of Article 1 are not applicable.

The registered letter sent to you, notifying you of permanent vacancies in the Carmen's Craft at Rockport Yard "carried <u>no</u> implication of a threat", nor was it harassment. This was strictly a letter of formally notifying you of employment if you so desired to work. The letter was registered to guarantee delivery and you were given the courtesy of 15 days from the date of the letter to express your desire to accept such employment.

Very truly yours,

cc: S. D. Dutro C. R. Harmon

General Capting Central COMPANY

OFFICE OF

OCT 5 1972

LABOR RELATIONS & PERSONNEL

CLEVELAND, OHIO